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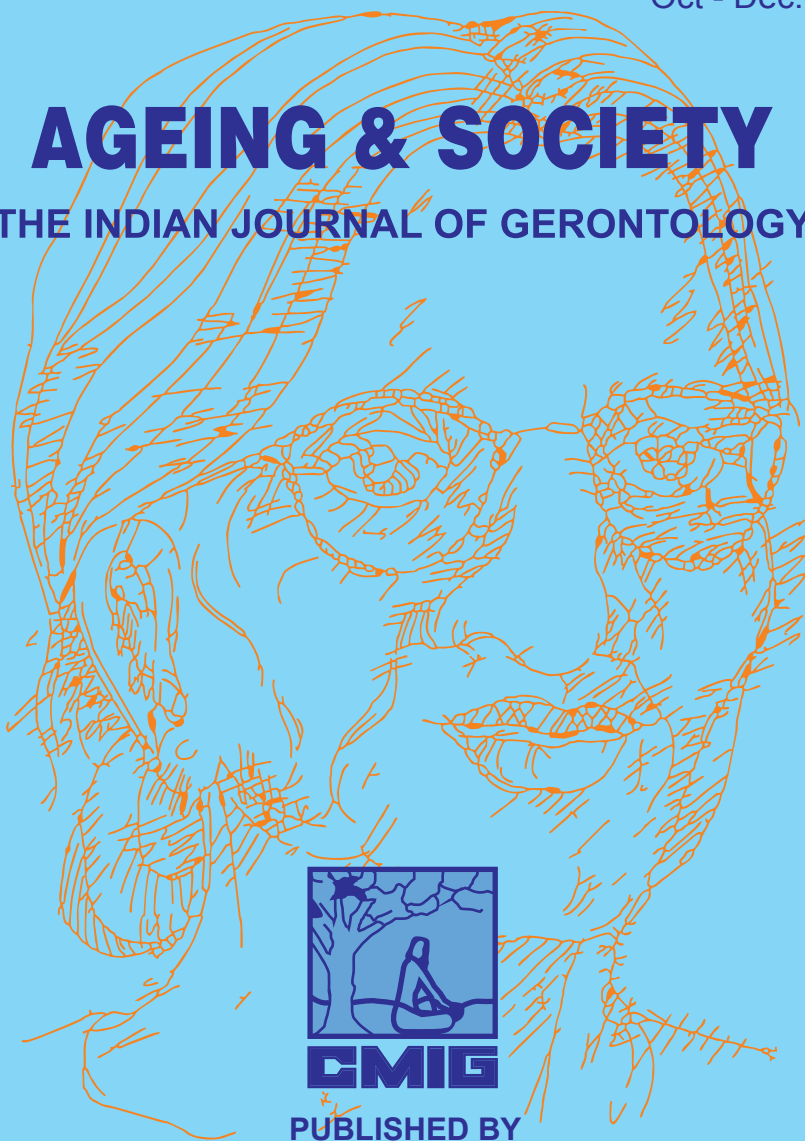
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# AGEING & SOCIETY

THE INDIAN JOURNAL OF GERONTOLOGY



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**CALCUTTA METROPOLITAN INSTITUTE  
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## CONCEPT OF AGEING IN INDIAN THOUGHTS

Dr. Indrani Chakravarty\*

“Is ageing all inevitable? Cannot the march of age be halted? Would the dream of Ponce de Leon for the fountain of youth remain a dream and not become a reality? Would the myth of Yayati who traded old age for youth never become true? Is Chyavana’s Prescription for immunity from old age mere fiction never to turn into fact?”

These are normally the questions that haunt us today as the shadows of life’s evening start spreading menacingly. Most of us are afraid of getting old and dying. The phenomenon of ageing had always been emotionally as well as intellectually fascinating. It is the natural urge of mankind to find a fountain of youth; to attain immortality and to escape ageing. However, these wishes, motivated by the nature of man’s existence, can never be fulfilled.

Man’s destiny that sooner or later one has to get old is an important problem which has given rise to keen self-reflection among many Indian religious thinkers and philosophers of the past. India is a land of religion. It is also the meeting place of various traditions. But the concept of ‘ageing’ differs with those traditions. It is almost impossible task to systematize Indian concept. Even in one tradition it is not hold unanimously. In this paper, I would like to elucidate some aspects of ageing as it was stated in Buddhist and Hindu literatures and to find out the similarities that exist between these two world religions.

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\* *Secretary, Calcutta Metropolitan Institute of Gerontology.*

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In early Buddhism 'ageing' was regarded as something disgusting. In a Scripture (Dhammapada) there is a chapter which solely discuss the problem of ageing (Jaravagga):

'This body is worn out, a nest of diseases and very frail. This heap of corruption breaks to pieces, life indeed end in death'. (148)

'Of the bones a citadel is made, plastered over with flesh and blood, and in it dwell old age and death, pride and deceit'. (150)

We wish to live long, but we cannot fulfil our wish, 'short indeed is this life, within a hundred years one dies, and anyone lives longer, when he dies of old age' (Suttanipata 804). Hence the ageing has been painted in such a manner which is not only unwanted but frightening too.

In the days of his youth Goutama the Buddha spent a seemingly happy life as the son of a king. Renunciation came to Goutama in the same manner as it does to all supermen and Avatars. The young Goutama could not bear the poignant pain arising from the three kinds of human miseries. In order to free himself from assaults of diseases, death, old age and all adversity in life, Gautama the Bodhisattya renounced the world in search of that agency or way by which these suffering might be put an end to and for the attainment of eternal bliss (nirvana) by means of meditation (Samadhi).

Nagarjuna, the second-century philosopher of Mahayana Buddhism asserted that youth and old age are not separate entities.

'If birth is regarded as the former, and growing old and dying are regarded as coming into being later, then birth exists with growing old and dying, and something is born without death'. (Madhyamako-sastra XI,).

Ageing is implicit in human existence itself. In the teaching of Twelve-Link Dependent origination (Paticcasamuppada) it is said as follows:

If it be asked, do ageing and death depend on anything? The reply should be, they do. And if it be asked, on what do ageing and death depend? The reply should be, ageing and death depend on birth'.

'If it be asked, does birth depend on anything? The reply should be, it does. And if it be asked, on what does birth depend? The reply should be birth depends on existences'.

'If it be asked, does existence depend on anything? The reply should be 'it does'. And if it be asked, on what does existence depend? The reply should be 'existence' depends on attachment'. The basic principle in this law of causation is laid down in following formula. 'This having been that comes to be, from the appearance of this, that arises. This having not been, that does not come into existence, from the cessation of this, that ceases to be'. Then how is it possible for man to avoid the sad destiny of 'ageing'? In the teaching of Buddha we find some clues to meet the problem.

A Brahmin ascetic asked the Buddha, saying, 'I am old, feeble, colourless; my eyes are not clear, my hearing is not good; tell me the truth of human existence, that I may know how to leave birth and decay (ageing) in this world. The Buddha replied:

'Seeing others afflicted by the body, and seeing heedless people suffer in their bodies, thereafter, shall you be heedful, and leave the body behind, that you may never come to exist in delusion again'.

The ascetic asked again:

'Tell me the truth of human existence that I may know how to leave birth and decay (ageing) in this world'

The Buddha taught:

‘Seeing men seized with desire, tormented and overcome by decay (ageing), therefore, you shall be heedful, and leave desire behind, that you may never come to existence of delusion again’ (Suttanipata 1122).

At Benaras the Buddha set forth the teaching of four noble truths.

1. That life consists entirely of suffering;
2. That suffering has causes;
3. That the causes of suffering can be extinguished;
4. That there exists a way to extinguish the causes.

‘The first noble truth is that life is suffering. Now, this is the noble truth concerning suffering: birth is suffering, ageing is suffering, disease is suffering, death is suffering, union with the unpleasant is suffering, the separation of the pleasant is suffering, any craving that is unsatisfied, that too is suffering’.

It is true that the teaching of Buddha considers life to be an unending succession of unpleasant events which might be called ‘suffering’. This idea that there is nothing but hardship in this world is one of the significant points of Buddhism. But suffering itself does not seem to be purposeless. In the process of overcoming suffering we find joy in human life. In the sphere of daily life, it has been a salient feature of Indian thought that age is esteemed and respected, and seniority matters greatly. In Indian agricultural society there has been a tendency to respect elderly people. To him who constantly practises reverence and respect the aged, four things will increase, life (longevity), beauty, happiness and strength. This teaching was inherited from the Mahabharata and the Law of Manu (II, 121).

Ageing tends to bring forth unwelcome, bad aspects as well. When one gets old, one tends to become obstinate. There is a convention in ancient India that elderly people should obey one’s children. This attitude was specially emphasized with regard to elderly women throughout India.

The modern concept of retirement was institutionalised long ago at least in Hinduism. The wonderful scheme of varnasrama dharma is propounded in Manu Smriti, the oldest Indian Law-book, whose injunctions are still followed by the Hindus. The Manu-Smriti organises the whole human race into four natural psycho-physical types (varnas) of human being, and four natural stages (asramas) in each individual life. According to last two asramas, Vanaprastha and Sannyasis the Hindus, chiefly Brahmins had to retire from the position of a householder and live the life of a hermit in the forest. 'When a householder sees his skin wrinkled and his hair white, and the sons of his sons, then he may resort to the forest' (The code of Manu VII, 2).

He may, taking a firm resolution and keeping his organs in subjection, dwell in the forest, duly observing the rules' (ibid. VI, 1)

After the Hindu has lived the life of a hermit in the forest, he becomes an ascetic who is wanderer.

'Let him always wander alone without any companion, in order to attain final liberation, fully understanding that the solitary man, who neither forsakes nor is forsaken, gains his end of spiritual liberation'. The code of Manu, VI, 42).

'He shall neither possess a fire, nor a swelling, he may go to a village for his food to live on alms; he shall be indifferent to everything, firm of purpose, meditating (and) concentrating his mind on Brahman the absolute' (ibid. VI, 43)

The ideal of becoming a hermit or an ascetic is a peculiarity of Hinduism and we cannot find a corresponding equivalent in other traditions. The rules laid down by Manu, implied that the obligation of society toward elderly people should not cease. Without involving them into the daily life, society should arrange something where they can live happily.

In spite of man's destiny to get old, his intelligence does not decay. 'The splendid chariots of kings wear off; the body also comes to old age, but the virtue of the good never ages, thus the good teach to each other' (Dhammapada 151).

There are some people who are in bed and who can neither work nor act. But they can help others with the spirit of gratitude. They can receive people with 'benign countenance and affectionate words' (Priya-alapa in Sanskrit). This feeling of gratitude is specially esteemed by Indians, with this feeling even sick people in bed can make others feel happy.

In the foregoing pages we have tried to present the available views on ageing collated from the scriptures of two great world religions. It appears from the excerpts that both the traditions believe in the doctrine of pain. Both the traditions hold that the individual souls suffer all kinds of miseries and privations, and they are subjected to birth, decay (old age) disease, decrepitude and death. Complete and over lasting extinction of sufferings and miseries of the world is the aim of both traditions. Though the remedial measures suggested by these traditions converge uniformly by taking recourse to renunciated life, their modus operandi departs from each other. The Buddhists believe that if the egos or individual beings can achieve cessation of all miseries, they will be able to attain tranquillity and eventually the immortal state of nirvana by extinguishing themselves like fire or a lamp. Their earthly existence becomes extinct and attains the state of Sunya (absolute non-existence). In Hinduism much stress has been given to the Varna and asrama duties ordained by the different castes. One can achieve (Mokha or Mukti) by performing Asrama duties laid down by Manu.

From all this it will be apparent that Hinduism is a very practical religion. It set before the Hindus the rules according to which people are to live not only hereafter but also in this world.

Till the last great war, if we fix a landmark, the aged formed such a minority in the population that society could very well afford to ignore it. But in the post-war years, as a result of major advances in medical sciences few people die young. The extraordinary increase in the population of the older people in both the developed and the developing nations has virtually created a 'Gray Revolution' and we need opportunity to re-evaluate old age, as a normal, natural intriguing and interesting stage of life cycle, and not to be viewed with only fear, anguish and disgust. Considering the significance of the problem of ageing in human life, we might say that words by Indian thinkers of the past give us some clues to meet the very important problems of the present.

## REFERENCES

1. Dhammapada
2. Suttanipata
3. The Essentials of Buddhist Philosophy –JunjiroTakakusu
4. Lectures on Buddha and Buddhism – RadhagovindaBasak
5. Manu—Sanghita
6. Hajime Nakamura, Plenary lecture in XI International Congress of Gerontology, 1978.
7. Science Today, August 1983.

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## CHANGING SCENARIO OF AGED IN INDIA SOME PROBLEMS AND PERSPECTIVES

Jamuna.D.\*  
Reddy. L. K.\*  
Ramamurti. P.V.\*

### Abstract

The Population of the elderly is increasing by alarming proportions. Industrialisation, modernisation and urbanisation have wrought in roads into the family structure and the status of the elderly.

What is the prevailing position of the elderly in our country? What do they think about their own future? What does the population at large think about the elderly? What is in store for the elderly in the coming Century? What preventive steps do we take in this regard? These are some of the questions which are discussed in this paper.

### Introduction

Alongside the enormous growth of population, there has been a proportionate increase in the number of elderly in India to 102.7 crore (Population Census of India, 2001). Modernisation, migration, urbanization and industrialisation have led to the problems of elderly, if for anything, more than what it might have been otherwise. With the prospect of increasing longevity due to better health care, the number of disabled aged may increase in the coming decades. These changes have tremendous social, familial and personal implications for India in the coming years. Indian research on the psychosocial aspects is very meagre and inadequate (Ramamurti & Jamuna, 1984).

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\* Are from Centre for Research on Aging Dept. of Psychology,  
S. S. University, Tirupati-2.

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In the context of these changed conditions in our country what is the present position of the elderly in our country? What do they think about their own future? What does the population at large think about the elderly? What is in store for the elderly in the coming century? What preventive steps do we need to take in this regard?

Firstly, let us consider the status of the elderly at present. Only 5 to 11 percent of the elderly have provided for themselves to a reasonable extent for their old age, while more than 90% believe that it is the duty of their children to take care of their children. More than half the elderly have more than one health complaint. About 10 to 15 per cent of the elderly are suffering from moderate to high amounts of disability. About 40 to 50 per cent of them don't have their spouse alive (NSSO, 1986).

What do the elderly think about their own future? And the future of coming generations of the elderly? The general attitude towards their own future is negative. Most of them are scared of illness and disability in old age though they all accept that death is an inevitable end. They are not very sure that all will go well in the economic front and anticipate more and more problems as the Rupee Value goes down day by day. Even in the family front they are not sure of favourable conditions that may last until their last days. Majority of them have expressed apprehension. Single women, elder widows and widowers appear to be the most depressed. Despite the fact they expect their children to take care of them, many of them feel that this is not going to be a smooth course. Some of them (nearly 1/3) wanted that they would like to stay independently but within close proximity of their children (Ramamurti, 1987, 1989; Ramamurti & Jamuna, 1986).

Interviews with children of aging parents and also children of middle-aged parents have revealed that more than 80% of the children expressed their desire to take care of their elderly parents in their old age. Almost all of them said they would care, if their parents were disabled. Only a very small percentage (1 to 2%) stated that all elderly should be institutionalised. By and large the public attitude towards

elderly also reflects that only when inevitable the elderly are cared by their children (Ramamurti & Jamuna, 1986).

Examining these recorded opinions and taking into account the fast tempo of changes in the socio-cultural milieu the future for the elderly looks ominous, but society has its own way to self adjustment. The protection of optimistic psychologists is that in view of the strong cultural and sentimental base that binds the parents and the offspring in the HINDU Culture. It is very likely that the elder care will continue to remain with the family and the grown-up children. This will be so, also due to the fact that as per Hindu custom the last rites has to be performed by the son. It should also be noted that for a poor country like India, State or public care of the elderly would be very costly enterprise fraught with several difficulties. Therefore, the country has to plan and encourage care of the elderly. We need to develop Governmental policies that would reinforce and encourage care of the elderly. Social recognition, financial, tax and housing incentives are some that can be thought of. We also need to organise, on a war footing the use of the media to enhance care of the elderly.

Caring for the elderly, particularly those with disabilities, is a burdensome and stressful experience. In caregiving function caregiver-care receiver interaction plays an important role (Jamuna, 1990). When mother-in-law and daughter-in-law relationships are strained, caregiver-care receiver interaction becomes an irksome affair, mechanical and devoid of finer emotions and sentiments. Primary caregivers felt that, after all, they were obliged to take care of the elderly as matter of responsibility (Jamuna, 1989, 1990; Ramamurti & Jamuna, 1990). Thus, there is hope for a better management of elder care, which would also provide for reduction in caregiver's stress. There is any amount of need for such interventions at the personal, community and media levels. However, there is an increasing trend in India for the establishment of caring facilities as in the West i.e.- nursing homes, community elder care centres, day care centres, hospices and domiciliary caring, particularly in urban locales. In sum, the

future of the elderly in India, though apprehensive at present, may brighten up, if we plan and prepare for the contingencies. The aged can be safe and secure only in the hands of their own children and kin. Towards the end, let us all strive so that, we and our children in old age can rest and spend their last days usefully and peacefully.

## REFERENCES

Population Census of India, 2001. Retrieved on 7th Jan, 2020 at: State/UT-Wise Senior Citizens (60+) Population, 2001 : Ministry of Social Justice and Empowerment - Government of India.

Jamuna. D. (1989). Caring for elderly women. Perspectives at the turn of the century. Paper presented at the National Seminar on Psychology in the 21st century. Jodhpur University, Jodhpur, December.

Jamuna. D. (1990). Burn-out among caregivers of disabled elderly. Do interventions help? Paper presented at the Seminar on HRD- Interventions, Bombay University. Bombay.

Ramamurti. P.V. (1987). The psychological status of the aged at the turn of the century. Some strategies to meet their needs. Proceedings of Indian social science congress Mysore. July.

Ramamurti. P.V. (1989). Perception of personal futurity across the life span. Paper presented at the ISSBD Meet. Jyvyskyia. Helsinki, July.

Ramamurti. P.V. (1989). Psychological scenario of the elderly in the 21st century. Paper presented at the National Seminar on Psychology in twenty first century. Jodhpur University, Jodhpur, December.

Ramamurti. P.V. & Jamuna. D. (1984). Psychological Research on the aged in India. *Jr. of Anthropological Society. India.* 19 (3), 269-286

Ramamurti. P.V. & Jamuna. D. (1986). Self-other perceptions of issues and problem of aged women in Andhra Pradesh. Paper presented at XI World Congress of Gerontology. ISA. New Delhi, August.

Ramamurti. P.V. & . Jamuna. D. (1990). Care for elderly disabled : Perspectives in 90's - policy implications. Abstracts of proceedings of meeting of Geriatric Association of India, New Delhi.

## A MARXIST APPROACH TO THE PROBLEM OF THE AGED

Bholanath Bandyopadhyay

### Abstract

It is a welcome sign that the social scientists have, of late, become aware of the problems of the aged. This is certainly due to increasing concern for the rapid growth in world population since the 1950s. With the growth in the life expectancy of the people due to spectacular developments in the medical and biological sciences there has, in particular, been a steep rise in the number of old people over 60 years of age. Demographers have provided various kinds of statistics in support of this contention. According to Population Census 2011 there are nearly 104 million elderly persons (aged 60 years or above) in India. The developing countries themselves will house more than two third of this population.

It is certainly a good sign that there is still a predominance of the younger age groups in the age structure of India. According to INDIA - A Reference Annual, 1973, nearly 42 percent of the population belonged to the 0-14 age group. In contrast, only 6.1 percent belonged to the 50-59 age group and 6.0 percent to the 60+ group. Thus, during the seventies about 12 percent of the total population belonged to the 50+ age group. However, as the population experts project, the expected increase in the 60+ age group during 1971-2021 period would be almost 100 percent.

In this respect emphasis was laid on traditional respectability of the aged in India, the social security arrangement under the joint family system, and the various kinds of State aid for the old people. Along

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\* *Bholanath Bandyopadhyay is Head of the Department of Sociology, Calcutta University.*

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with the government various voluntary organisations have also come forward to mobilise the community resources in the service of the aged. According to the Ministry of Social Welfare there are about 280 such agencies which have been providing a wide range of services like residential care, medical and psychiatric care, recreation, financial assistance, counselling etc.

Of course, much more needs to be done for the aged in India. But the objective of the present paper is not to enumerate the list of areas in which the official and non-official agencies should extend their hand of cooperation for the old and infirm. Its object is limited to providing a new perspective for social gerontology in India. The main inspiration of this perspective comes from Marxism. It may seem strange to talk of Marxism in the analysis of old age problems. There are, in fact strong grounds for denying any scope for Marxist analysis of ageing. In the first place, in none of the classical texts of Marxism do we come across any reference to the specific problems of the aged in society. Marxist analysis of the family has mainly laid emphasis on the role of the family as an ideological institution, the materialist analysis of domestic labour, role of socialisation of children towards the maintenance of the capitalist social relations etc. But genuine Marxist research in gerontology is few and far between.

Secondly, like wealth, status and power, old age and sex are not generally considered as variables in any scheme of social stratification. Because they are considered as given attributes of man as a physical being. However, modern developments in the fields of health and hygiene, patterns of leisure and recreation, and attitude of the different agencies towards the old people have given rise to the general idea of recognising the age groups as a particular kind of strata. But this stratum has not even a remote connection with the notion of economic class.

Finally, according to the accepted definition, the problems of the aged defy class analysis. For the problems of the social adjustment of the old generation in all societies is so universal they can only be

assessed from a humanitarian point of view and not class point of view. In fact, gerontology has mainly thrived on humanitarian consideration. Social researches so far done on the problems of the aged or the measures adopted for the welfare of the problems of old age. To me there is no fundamental opposition between this approach and the proposed Marxist approach. But the latter approach, I think, may provide a better insight into the problems of the aged particularly in the developing countries like India.

In the first place, Marxist study of gerontology would throw light on the socioeconomic conditions giving rise to the problems of the aged. Social gerontology had its origins in the United States in the 1940s, that is, the period of the gravest crisis of world capitalism, One can thus argue that when in the aftermath of the great depression the imperialist war had torn into pieces all old social values and institutions and had brought the liberal democratic political systems of the West to the brink of legitimacy crisis, the social scientists became aware of the specific problems of the aged. One of the central objectives was certainly to instil confidence among the war-torn public regarding the crisis-ridden liberal democratic systems. They could do this only by drawing attention of the policy makers to the tension areas of the society. Problems of the aged was one such tension area which, if overlooked, might generate much social conflict. Viewed in this light, social gerontology played a functional role in the maintenance of the capitalist liberal democracy.

Secondly, to a Marxist thinker alienation and estrangement of the senior citizens of a country are integrally related with the capitalist mode of production. It is the capitalist civilisation, developing social relations on the basis of 'cash nexus' which had destroyed the extended family system and introduced in its place the nuclear family system. Urbanisation, industrialisation and social occupational mobility are nothing but concomitants of capitalism. Social maladjustment, isolation, loneliness, neglect of family care, every form of alienation of the aged is thus unique feature of the historically specific capitalist mode of production. There is, however, a fundamental

difference between the working-class alienation and the alienation of the aged. For, while the nature of job itself in a capitalist firm becomes the source of alienation and dehumanization of the worker, jobless and forced retirement from all kinds of productive labour are primarily responsible for the alteration of the aged. In fact, the very attitude to the unpaid domestic labour which lies at the heart of explanation of the services of the vast women work force also may be held responsible for the cynical approach to the role of the aged in society. A society which knows nothing but self-interest and measures everything in terms of monetary returns cannot show any respect for the old and inform who will continue to be on the debit side of the social budget. So proper understanding of the social, economic and psychological problems of the people who are on the wrong side of the needs a thorough reorientation of our attitude to work in general and domestic labour in particular. And this is possible only by way of a critical approach to capitalism. Thus, the Marxist perspective on gerontology ultimately projects replacement of capitalism with a higher form of socio-economic formation as a basic precondition for the desalination of the old.

Thirdly, Marxist class orientation to the problems of the aged is highly necessary in a class divided society. One must here distinguish between the cyclic problems resulting from ill health and diseases in old age and those resulting from socio-economic constraints. While the former prevails irrespective of class differences, the latter are certainly class-specific. In this sense social-psychological problems of the aged belonging to the working-class family would not be the same as that of the aged to the peasant families. Problems of the old rich peasant would certainly be different from those of the old poor and landless peasant. Similarly, the social constraints of the urbanite intelligentsia are bound to be different from those of the rural gentry. So we need different kinds of social medicine for different classes of the aged. Herein lies the importance of the Marxist class approach to the problem. But in our country gerontological research is heavily tilted in favour of the middle class and some peripheral elite. There has hardly been any effort to know the exact



nature of the problems of the aged among the rural or urban poor. As Rajeswar Prasad correctly remarks, 'in a society where more than 80 percent population lives in the villages and an aggregate of more than 55 percent of the rural and urban population merely exists below the poverty line, it is not the problem of the aged that becomes important but it is the problem of poverty that needs urgent attention. And the major problems of the aged viz., Malnutrition, lack of proper housing, adequate medical care, and even destitution will be largely taken care of if a frontal attack is made on the problem of poverty.' (see his article 'Problems of the aged in India: Some Reflections' in M. L. Sharma & T. Dak (ed), *Ageing in India - Challenge for the Society* (1987), Ajanta Publications, New Delhi). This is in a nutshell the crux of the matter. Alienation of the aged cannot be overcome completely within the capitalist framework. But under the given circumstances of our country we can meaningfully try to adopt a positive approach towards the problems of the aged by implementing poverty amelioration programme taking into account the specific needs of the different classes and sections of society. Marxism would have certainly supported revival of joint family ties to provide psychological solace to the old in society. But since this implies reversing the wheels of history, community homes in every locality run by people's communes with adequate economic support from the State would certainly be a much more progressive step than present system of paltry doles in the form of old age benefits.

The paper was prepared for panel discussion in the symposium on Ageing & Society held on 19th September, 1992, under the auspices of Calcutta Metropolitan Institute of Gerontology.



## INTERPERSONAL RELATIONS OF THE ELDERLY

Dr. S. Vijaya Kumar\*

Interpersonal relations between family members of different generations have been a strong substantive focus of researchers interested in the aging family (Bengtson & Cutter, 1976). The role that family members play in the lives of the elderly is a crucial component of the socio-economic and emotional support systems of the elderly. (Shanas, 1976).

In India, the existence of an 'extended' kin network in which parents, children and other relatives are in regular and frequent contact with one another is a fundamental part of the traditional welfare system. The family continues its traditional role of caring for the elderly, however, the well-known symptoms of modernization described for the developed countries are now also being exhibited in India, including the negative symptoms of alienation and cultural disorientation. Nevertheless, research studies (Ramamurti 1990, Vijaya Kumar 1988) consistently demonstrate that intergenerational contact is a persistent and long-standing feature of Indian family.

Based on my research work (1986 to 1991) a brief theoretical discussion is made in this paper how the intergenerational relations which are persisting with changes from time to time within the aging family. Intergenerational relations may be defined as a set of reciprocally adjusted habitual responses capable of binding a number of participant individuals collectively to one another.

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\* *Research Fellow, C. D. Deshmukh IMPART Centre,  
Council for Social Development, Hyderabad-13*

The parent child relationship may pass through stages of subordination, equality and dominance. The latter relationship may occur if the parents experience a serious loss of health or economic status in the later years, thereby necessitating a reversal to a childlike dependent status. In general, a parent is involved in a reciprocal interaction with children throughout the life cycle. This type of lineal interaction can vary in frequency, quality and type, depending upon the age, interests and needs of the two generations.

**Husband and Wife:**

In general, the relationship between husband and wife springs up in terms of economic specialization and cooperation, sexual cohabitation, joint responsibility for support, care and upbringing of children, well defined reciprocal rights with respect to property, spheres of authority and so on. As they grow older, their joint responsibility decreases and they gradually withdraw from economic activities. Both of the aged couple become dependent upon their grown-up children. The normal life of an aged in the family undergoes lot of changes. The aged gradually become rigid and they are rather slow in accepting any change in the family culture. In the long run of life-cycle, the 'married life' is the lengthiest part and both the husband and wife get accustomed to a particular way of life and daily activities. This long-time habituation results in making them unadjusted and in developing unadaptable mentality to new rather rapidly changing environment in the form of demands, roles and values and tradition. In the earlier stages of family life, husband spends most of the time outside the house engaging in economic activities. Hence the interaction between husband and wife will be less. After attaining the age of 60, gradually he retires from the economic activities and he finds much time to spend with his wife and this ultimately increases the communication between them. The long association and companionship of husband and wife, develops love and affection on each other especially in their children, strong mutual cooperation exist between them.

**Father and Son:**

The relation between father and son exists in terms of economic cooperation in masculine activities under the leadership of the father, obligation of material support generally vested in father during the childhood of son during old age of father, responsibility of father for the instruction and discipline of son, duty of obedience and respect on the part of son as such. Aging in both generations brings about a lot of changes in these normal obligations. While father is in a position to do normal economic activities, maximum level of economic cooperation exists between the father and son. The son depends on his father until he is grownup to the extent of becoming independent and the father, who by then becomes aged, depends in turn on his grownup son. In the Indian traditional culture 'filial piety' is existed and at present due to modernity and growing individualism among the younger generation, the relationship between these two generations in terms of 'filial piety' is slowly getting vanished.

Evidently, elderly parents' interpersonal relations with their sons are found to become worse unless the aged have either savings or property, or otherwise they have to depend upon their sons.

**Father and Daughter:**

The interpersonal relations between the father and daughter exist in terms of the responsibility of father for protection and material support prior to the marriage of daughter, the economic cooperation, instruction and discipline, which are appreciably less prominent than the father-son relationship. Before marriage in rural sectors, most of the female children participate in the agricultural and allied activities to support their parents' income. The father on his part holds full responsibility of the daughter until her marriage. After marriage/and there onwards only occasional interaction exist between the father and daughter.

No doubt, most of the elderly dislike to live with their daughters, nevertheless they have admitted that are looked after well by their daughter, and by their sons.

**Mother and Son:**

The relationship in terms of dependency of son during infancy, imposition of early disciplines by the mother, moderate economic cooperation during the childhood of son and material support by son during the old age of mother is the ideal. After mother attains her 60s economic cooperation from mother to son decreases and her dependency on the son increases. A sort of communication gap develops between the aged mother and her married son. In course of time, they lose normal relationships with their sons.

Most of the roles which women performed in their younger days in the family shift into the hands of daughter-in-law after their entry into the family.

**Mother and daughter:**

The relation between mother and daughter is parallel to that between father and son, but with more emphasis on child care and economic cooperation than on authority and marital support. There will be less economic cooperation between them before daughter's marriage.

**Parents-in-law and Daughter-in-law:**

Superordination and imparting discipline on the part of the parents-in-law and subordination and showing respect on the part of the daughters-in-law formulate the established relationship that exists between the parents-in-law and daughters-in-law. Changes in marriage system, modern education for women and the increasing tendency of women participation in the work force is disturbing the traditional relationship between these two generations. Modern young women desire to have separate homes but not to live in joint families, the cultural changes since the parents' days of youth and unwillingness of modern daughter-in-law to use old fashioned methods in socializing their children or to maintain their family often lead to strong difference of opinion. In traditional India, daughters are brought up in such a way that after marriage they should treat their parents-in-law with respect. Perhaps the present-day situation is changing and some of the customs of our traditional culture is itself in transition.

In the contemporary context, traditional relationships between these two generations have, however, undergone substantial changes and modifications. Caregiving to the elderly have become more complex and less accessible. But it depends primarily on personal relationship linking an aged individual with his/her younger generation.

Interpersonal relations of the aged with other members of the family changes to some extent, after death of one of the spouses. The death of the aged husband brings about serious consequences for the aged women. As long as he is alive, the aged woman is looked after well, both in her family and in the society. After the death of her husband, the woman is left alone to suffer the pains and agonies of widowhood. Widowhood brings sudden change in the status of an individual.

The arrival of the daughter-in-law causes erosion in the status of aged woman as some of the roles shifts from aged mother to daughter-in-law. For instance, the responsibility of taking care of her son, which a mother likes more than anything else, will be slowly taken away by her daughter-in-law by seeking favours from her husband, and this way slowly she usurps the position of the aged woman. The task becomes easier if the aged woman is a widow. For these reasons, an aged widow would not be willing to live with any of the married sons, as she is afraid of adjusting herself to cope with these difficulties.

From the brief discussion, it is implicit that the elderly can maintain their status and good interpersonal relationships if (i) their spouses are alive (especially in case of elderly women), (ii) they are physically able to perform some beneficial functions for the family, (iii) they will adopt humorous attitudes towards modernization, (iv) they have property in their hands, (v) they try and succeed in adjusting themselves with the changing family environment.

## REFERENCES

Bengtson, V & N Cutler 1976 Generations and intergenerational Relations: Perspectives on Age-Groups and social change in Ed. Vol: HANDBOOK OF AGING AND THE SOCIAL SCIENCES by Binstock. R &Shanas. E. New York: Van No Strand Reinhold.

Ramamurti. P. V. 1991 Towards Quality Aging in Ed. Vol. QUALITY AGING by Indra Jai Prakash Dept. of Psychology. Bangalore University. Bangalore.

Shanas. E. 1979 "Social Myths Hypothesis: The Case of the Family Relations of old People" The Gerontologist Col: 19 No.1

Vijaya Kumar. S 1988 'Family and Socio-economic problems of the aged' (Ph.D. thesis) New Delhi. Ashish Pub. House (in Press)

## NOTES FOR CONTRIBUTORS

All Contributions and correspondence should be sent to Dr. Indrani Chakravarty, Calcutta Metropolitan Institute of Gerontology, E-1, Sapan Kutir, 53B, Dr. S. C. Banerjee Road, Kolkata-700 010. Contributors are requested to conform to the following norms and those articles that do not conform may not be considered.

Journal articles that deal with the biological, medical, psychosocial, service or other aspects of ageing are welcome.

Articles should be original contributions. Redundancy is discouraged. The articles should be written in English, free of grammatical or spelling errors, repetitions etc.

Articles shall contain: A brief introduction (reflecting the context, the review of relevant work and why the present study was planned) : relevant details of plan methodology, sample, ( including standardization properties of tools) etc., the results or findings and their discussion and conclusions arrived at. At the beginning of the article the title and names of authors shall be mentioned. (Their affiliation may be given at the bottom of the page). This shall be followed by a brief abstract of the article (not exceeding 100 words) in single space, bold and set off the margins (inset by two spaces). Two or three key words of the article should be provided at the end of the abstract separately.

Articles may be computer generated. Two hard copies, double spaced in A4 size (one side only) with wide margin may be sent. The articles would be adjudicated by referees and the result would be communicated. When the article is accepted contributors are requested to send 2 corrected versions of the article (hard copies) and the same in an electronic version in CD, press ready.

(a) References as below in international style (e.g. journal of Gerontology) arranged in alphabetical order in the Text : (Altekar, 1973, Birren, 1959, Tyson 1983 ....). End list of references:

Baltes, P. B. (1987). Theoretical propositions of life-span developmental psychology: On the dynamics between growth and decline. *Developmental Psychology*, 23,611-626.

Baltes, P. B. Reese, H. W., & Nesseiroade, J. R. (1988). *Life-span Developmental Psychology: Introduction to Research Methods*. Hillsdale, NJ : Erlbaum.

(b) Footnotes should be avoided unless absolutely essential.

(c) Tables and figures should be clearly laid out, typed in standard format, numbered consecutively, and designed to fit on the page of the journal "AGEING & SOCIETY" of CMIG.

