

FACTORS AFFECTING THE LIFE OF PEOPLE AT ‘OLD AGE HOMES’: A SOCIOLOGICAL STUDY OF AGEING IN HARYANA

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ABSTRACT

The present research delved into the intricate web of factors influencing the quality of life among elderly inhabitants of 'Old Age Homes' in Haryana. In Indian culture, the place of old people in the house is very important but with the change in social structure, the status of old age people is also changing. As a result, old age homes are becoming an important topic of study. Employing a comprehensive sociological approach, the study aimed to decipher the multifaceted nature of ageing within this context. Through meticulous analysis of social interactions, healthcare provisions, emotional well-being, and other pertinent dimensions, the research shed light on the nuanced influences that shape the lives of seniors in such environments. This research unveiled the intricate dynamics of ageing within 'Old Age Homes' in Haryana, highlighting the significance of social connections and healthcare provisions. By drawing on secondary sources, this study provides valuable insights into the multifaceted influences that shape the lives of elderly individuals, offering a comprehensive perspective on their quality of life within these settings.

KEYWORDS: Ageing, Haryana, Health, Old age homes, Social Structure, Social Factors

1. INTRODUCTION

The aging process begins the moment we are born. As we age our bodies and minds grow, develop, and mature. During childhood, the course of our development is influenced by many factors including our characteristics, our family background, how we are raised, where we grow up, and

who raises us. Similarly, our development throughout adulthood continues to be influenced by our health, attitude, and behaviors and our interactions with family friends, and the environment around us. Ageing matters of physical health and decline. Ageing is a complex process influenced by many other personal and social factors. In this process old age is the final stage of human development, and it is also the time when the most social, biological, and psychological changes take place (Neeraj et. al., 2021 and Richard, 1962).

Gerontology is the scientific study of ageing that examines the biological, psychological, and sociological factors associated with old age and ageing. The genetic background and physical health, psychological influences include the level of cognition, mental health status, and general well-being and sociological factors range from personal relationships to cultures, policies, and infrastructure that organize society. But the role of old people in earlier times is very important. Old people are like the guide for the family but in the race of becoming advanced, everyone is busy in their life. The health and economy also play an important part for old people as they both put them backward in life. Due to these health issues and economics, the family did not give importance to old people and they made a space for them. Through this study, researchers tried to deeply investigate and explore the life experiences of the people living in Old Age Homes. So, the research will help in making future policies for old people.

In Indian culture, the place of old people in the house is very important. In Haryana, the elderly population made up 7.5% of the total population in 2001, which is normal. In 2011, the percentage of people over 60 rose to 8.78%. It indicates that the average growth rate for the indicated time was around 17.06%, nearly twice as high as the corresponding national average of about 8% (Census, 2011). The table 1 presents the percentage of Haryana's population above 60 years, categorized by sex and residence (rural/urban), showcasing a gradual increase from 1971 to 2011.

Table 1-Population over the age of 60 in Haryana by sex and residence (in percent)

Year	Total Person	Male	Female	Rural	Urban
1971	5.8	3.4	2.3	4.8	0.9
1981	6.3	3.7	2.7	5.1	1.2
1991	7.7	4.0	3.7	6.2	1.6
2001	7.8	3.9	3.9	5.9	1.9
2011	8.7	4.3	4.4	6.6	2.1

Source – Census of India, 2011

Family decisions were made by the old people by their experiences and a joint family has a very special role in guiding, knowledge, security, caring for small children, and many other ways. But as the people adopted modernization the place of old people and their value in the family is decreasing. Due to advanced technology, the younger generations are more addicted to gadgets and the most victims are the old people. During the corona pandemic, most old people felt very alone as the people were busy with office work from home and the children were also in online studies and games, etc. Governments are also trying to help old age people in many ways. The Haryana government gives some amount of money every month to people of age above 60. A total no. of 1810913 old age people are getting an ‘old age Samman allowance’ of Rs. 2500 per month (Govt. of Haryana, 2023). Old age is a stage where one thinks that he/she will get more attention and care from the family members. But in a time where money is more important for survival, today's generation thought that they were now of no useful benefits for them, so they started avoiding them. The increasing number of old age homes is proof of this. The technology creates a generation gap between the old and the young generations. So, this study will mainly focus on the factors that affect the life of people in old age homes.

2. REVIEW OF LITERATURE

There are many theories of ageing that provide different factors to explain ageing in sociology. Disengagement Theory by Cumming and Henry 1961 in the book *Growing Old* and this theory is considered the first theory of ageing. This theory states that in old age people are less engaged and they feel lonely. As the trend is changing towards nuclear and small families, the old people are separated from the family line. Now they have to live alone or in old age homes they have to choose. Havighurst and colleagues in 1961 formulated a theory named, *Activity theory* which stated that, there is a positive relationship between the individual's level of activity and life satisfaction. The activity theory of ageing proposes that older adults are happiest when they stay active and maintain social interactions. These activities, especially when meaningful, help the elderly to replace lost life roles after retirement and, therefore, resist the social pressures that limit an older person's world. George Maddox first used *Continue theory* in 1968, but Robert Atchley further developed this theory. Continuity Theory 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.

A. People's Attitudes towards Old Age Homes

By defining the reasons behind going to old age homes, Kwok & Luk (1998) explained that 28% (56) of respondents are in favour of going to old age homes for one or any reason. Most of the respondents, about 84%, never visited old age homes. 40% are not feeling happy when they go to old age homes, 25 are neutral and 155 are happy at home. About 11.2% thought of poor facilities at old age homes, 52% did not comment on anything, and 43% said that if they can afford it, they agree to go to old age homes. And an interesting fact comes that doctors' advice was more impactful than the family members. In the last conclusion, half of the respondents opted for old age homes if they were alone with no relatives. And very less thought they will be unhappy there.

Menezes & Thomas (2018) described the increased population of old age people, and their care as one of the biggest factors. As old age people need social, economic, security and time etc. so the young generations are made aware of the needs and experience and coping with the styles of older people. There are a lot of old people who are living alone. So, old age homes are coming into existence to take care of such people and meet all their basic requirements. Kumar & Pandey (2017) examined mainly the quality of life one lives in old age homes. Here are some people with

whom he discussed the quality of life, quality of the elderly, quality of life and aging, quality of life and old age homes etc. so he discussed the following points. So, there is a comparison that concluded that old people having good health share good impacts on the family they share their experience and knowledge. The increase in age is the main factor for the disorder and that affects the quality of life. If someone has good health, he/she will enjoy a good life more than others who are diseased. The old person in this study has a psycho-social intervention program that develops a better quality of life.

B. Facilities Provided in Old Age Homes

The structure of old age homes and the facilities provided by the management is also a concern for the people who live there. Hemamala & Anil (2018) concluded that there is almost a similarity between the old age homes of the two states. The facilities like the availability of ambulances, regular doctor check-up, and others are quite similar except for some due to the locality of old age homes. The rule and regulations that old age home management made for betterment but respondents think they need to change. This creates variation in satisfaction levels. Kashyap (2008) stated that there is a low level of satisfaction among respondents regarding the facilities available. However, the management is clear that they are improving but what the researcher got is not similar.

Among all the facilities, providing security to old age people is the major one. Nayar (2016) discussed the overall information about the establishment of old age homes provided by the government of Kerala. It contains 12 chapters starting from the designing of old age homes, admission procedure containing rules regulations, security issues and other all-important information about old age homes and how they are maintained and regulated. Veda C. (2017) discussed the family structure of people changing from joint to nuclear. The most affected are the elderly. So, old age homes are established so that people do not feel lonely and they give better care. The old age homes help in reducing loneliness, and depression and take care of the basic needs of the old age people. There are two types of old age homes: one is paid and the other is non-commercial. There is some difference in the old age types about the basic needs are the same in both however paid old age homes provide some better and additional facilities according to the fee.

C. Social Capital and Isolation in Old Age Homes

By having the social capital in their home, old age people feel a sense of comfort which is a missing factor in old age homes. Dubey, Bhasin, Gupta & Sharma (2011) stated that in Indian culture the old age person is respected in the family. The old age people in a joint family have a very special role in guiding, knowledge, security, in caring for small children's many other ways.

In this article, it is clearly said that the women in the family are more respectable, and the feeling of women in the family is better positioned than an institutional one. There is a better social relationship as the family interacts and keeps engaging with them. But due to the economy and the trend toward nuclear families changing a lot, old people are crushed in this present situation. Umadevi & Kiran (2015) did 8 case studies and compiled the full routine and overall inspection of their life. The main conclusion drawn is that the old generation is trapped between two folds; one is the decline in traditional values and the other one is the absence of an adequate social security system so they cannot manage themselves in the situation in the family. The life of women was mostly satisfied, with loneliness and depression. However, all the respondents manage their daily routines very well without much difficulty and they are spending their life on their own. There is also a clear connection between the health and social life of old age people. Reeder L.G. (N.D.) states the major focus is on the medical care of old people. As with ageing productivity and the capacity for doing work is decreased and the body is well so that it cannot maintain good health. So, the old age body is prone to diseases. So, the disease is more in old age people. This directly impacts the social life of the people. As a diseased person there is not so much value to the recent style of living. So, health is one of the factors that increase old age homes.

Nyquist, Catten, Andersson, Forsman & Gustafson (2013) took respondents between the age group 85-95. The study completed 485 respondents and the study is conducted in urban and rural municipalities in northern Sweden and western Finland. 55% of respondents experienced loneliness in an institutional set-up, and 45% of respondents felt loneliness at home. Social capital and loneliness are inversely related as social capital is more loneliness is less. In their study, Kalaver Jamuna & Duvvuru (2008) conducted 150 interviews in which 65% of the respondents were females and 58% of them were widows. According to the respondent, childlessness and strained intergenerational relationships play an important role in the decision to relocate. With the changing pattern of family, the intensity towards pays and stay homes in urban areas increases. The interpersonal relationship with the daughter appears to be marked by a greater degree of contact and closeness.

D. Psychological illness among people in Old Age Homes

The population that lives in old age homes suffers lots of psychological issues such as depression and anxiety. Makhte & Kumar (2015) discussed the depression level among elders in old age homes. The researcher took 80 respondents interviewed through a pre-designed questionnaire. Assessment is done by using BECK'S DEPRESSION INVENTORY.

All formality was done before taking the interview. The conclusion drawn is that the mean age of respondents is 67.4+/- 4.7. Most of them are in the 66-70 age group in which 55% are males and the rest are females. The mean depression was 21.64. maximum 39(48%) with moderate depression, and 23(29%) had mild disturbance. The depression level is high in the present study and the factor is increased age and loneliness. Shrestha, Roka, Shrestha & Shakya (2017) discussed the majority notice disorder insomnia among old people in an old aged home. The present study is conducted among 148 elderly respondents of age group 60-94 through random sampling and semi-structured interviews. The main result is that 61.5% of respondents had insomnia due to many factors like age, irregular sleep, loneliness etc. 75% of respondents reported pain, and 65.5% report weakness of extremities. Depression is also noticed among older people.

The level of depression among old age people also varies due to the adaptation of themselves differently. Grover & Malhotra(2016) stated that the old age population in India is increasing. It is estimated that about 19% of the population will become old by 2030. So, this creates a problem as about one-fifth of the population is unproductive for a country. Health is related to age. Aged people are more prone to diseases like depression, insomnia and many other disorders. But depression is a majorly seen disorder among old age people which affects the quality of life. In this article 51 studies are reviewed to make a better understanding of depression among old age people. And found that depression is prevailing in old age with loneliness. Bohra, Shrivastava & Bhatia(2015) talked about the types of depression which are measured in levels like a low grade, intermittent, and pronounced depression substrate(dysthymia). Then they talk about the causes of depression, trauma, loss of loved ones, difficult relationships, and many others. Finally, they conclude that depression is found in every age group less or more in women. The causes are multiple roles and family pressure. Bansal, Chaudhary, Soni, Sharma, Gupta & Kaushal (2015) in their study concluded that out of 180 respondents, 156 (86.6%) had depression and 144 had anxiety. Most of the respondents have moderate depression 49.5% but anxiety 69.4% had mild form. With increasing age, the level of depression increases while the widow is more prone to

this. The most affected age group is 50-60% of anxiety. Mild anxiety is common in married women (75.2%).

3. RESEARCH OBJECTIVES

This research paper aims to delve into the diverse factors that shape the quality of life for senior citizens residing in 'Old Age Homes' in Haryana. By examining various aspects, such as social interactions, healthcare provisions, emotional well-being, and more, the research aims to provide a comprehensive understanding of the multifaceted influences that contribute to the lives of elderly individuals in these settings.

4. RESEARCH METHODOLOGY

The present paper is mainly focused on secondary literature in which articles, news reports, books, etc., and the census are also included. The present paper is on Haryana state. While talking about Haryana, among all 22 districts, 16 districts provide the facility of old age homes. In these 16 districts, there are around 27 old age homes where approximately 1000 inmates are residing including both males and females (Department of Social Justice and Empowerment, 2023). Over the years, sociologists and researchers from other fields have tried to map out the changing structure of families, problems of aging, and other issues.

5. CONCLUSION

The concept of old age homes is not new but with the changing in the family structure and behavior of the people, the trend of opening new old age homes is a must. In the past pandemic i.e., covid-19, the worst affected were the old age people, the hidden truth of the pandemic. The online system made everyone live a private life. The office workers were busy with their work at home the whole day on laptops, the children had their online classes and there were many other online platforms that emerged during the lockdown. The old people are worst affected by this online system. The foremost outcome of this is that old age people felt loneliness in their own homes. The reason was the child and earners of the family were busy with their work. The lockdown made people stay at home. The young ones manage themselves through technology but the old people had no such facility.

Traditionally old people sit outside with other old people, talk and share their things with their grandchild. But when the lockdown occurred the grandchild was busy with their online education, and the friends that people were not allowed to go outside. This all affected the elderly

very much. Through the study of different researchers, it has come out that people are not in favor of going to old age homes. But one-fourth of people are willing to go to old age homes, they have their own reasons like family conditions, disputes among members, etc. Many studies have shown that the facilities were almost the same in old age homes of the same groups but there were some differences in facilities of old age homes, government and self-paid ones.

The frequency and the quality of self-paid are better than the others. When we talk about the relationship between people the studies show that the relationship with the daughter is better and the frequency of coming to meet them is more than the son. It shows that the daughter is closer to the old people than the son. After all, there were some illnesses also observed among the people living in old age homes. Majority of the people suffered from insomnia, depression, and anxiety. The level of depression was very high among the people. The reasons were loneliness and stress. The factor that comes out is loneliness which creates depression and anxiety among people. People are not able to share their feelings and emotions with anyone and it leads to depression. Also, there is a need for in-depth and primary sources-based study.

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