Older People and Factors for Leaving Families

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Abstract

Indian culture treats the whole world as one human family "Vasudev Kutumbakam". The beauty about the Indian culture lies in its age-long prevailing tradition of the joint family system. The Indian family has been a dominant institution in the life of the individual and the community based on strong values of love, care and mutual respect, bound the family members together. But in the last few decades, the researches show that the traditional joint family has crumbled due to forces of urbanization and modernization which lead to the establishment of nuclear families. In nuclear families led to erosion of authority commanded by the older members as the economic head of the family. Because of this reason older parents became economically depend on their children which threatens the status of financial, emotional and self esteem of older persons. These threats along with independent living and modern values of children create conflicts between older parents and other family members, say, Sons and daughter-in- laws. And other factors such as lack of care, ill treatment by family members, Income of the sons were not sufficient to run the family led older parents leave their families and joined old age homes. The objective of this paper is to analyse the factors responsible for older persons to leave the families, to know the level of life-satisfaction of older person in old age homes and to understand the demographic profile of the older persons.

Key words: Older Person, older parent, Joint Family, Nuclear family, Factors for leaving family

Introduction:

The traditional Indian family is a large kinship group commonly described as joint family. This feature is very unique to Indian families. Manners like respecting elders, touching their feet as a sign of respect, speaking in a dignified manner, taking elders' advice prior taking important decisions, etc. is something that Indian parents take care to inculcate in their kids from very beginning. The head of the family responds by caring and treating each member of the family the same. In joint family concept, Care giving of family members requiring medical care, emotional support, and financial assistance was always the duty and responsibility of the entire family. The family supports the old; takes care of widows, never-married adults, and the disabled; assists during periods of unemployment; and provides security and a sense of support and togetherness. In the traditional Indian culture, people who lived over 60 years were considered as repositories of wisdom and sole authorities to the family and community. The concept of 'vanaprasta' and "sanyasa' were the social mechanisms that encouraged the aged to move away from the management of every day concerns. The joint family easily accommodated their older person persons. But the situation has been changed totally by the intervention of modern institutions in the everyday affairs of human life. Changes in attitudes, rapid industrialisation, and migration patterns, among other factors, have all paved the way for a change in the profile, structure and fabric of the traditional Indian family. The size of the multigenerational household has decreased considerably since the late 1960s, with the advent of the nuclear family set up. Instead, a husband and wife along with their young children is what have emerged as a typical modern family household. (Anjali Raje-2012). The most prominent feature of the disintegration in joint family system is the erosion of authority commanded by the elder members as the economic head of the family. Because of this reason older persons became economically dependent on children. Modernization has profoundly influenced the values like interdependence, cooperation and self- sacrifice giving way to independence, personal mobility and personal achievement. All these factors have contributed, to changes in the structure and the functioning of the family system. This changing scenario pushed older persons into more vuvernable situations such as leaving families, joining old age homes.

Review of Literature

Factors for Leaving Families

A report on Evaluation of Old Age Homes, Day Care Centres and mobilemedicare Units in Andhra Pradesh by Ramamurti & Jamuna (1997) Submitted to Ministry of Welfare, Government of India, New Delhi, This survey has carried out to evaluate old-age homes, found that the older person, who are destitute, childless, uneducated and who have less desire to live with their children, opt for institutional care in 'free homes'.

Pinto and Prakash (1991) conducted a study among the older person, aged 60 years and above in Mangalore. It was a comparative study of quality of life of older person institutionalized with those who are living in families, using a semi-structured interview schedule. 25 inmates from old age homes and 25 form families were interviewed individually. Lack of family support, dissatisfaction with children, absence of children, death of spouse and ill health were found to be the reasons for institutionalization. Whereas Ara (1995) and Jamuna (1997) and found that the most common reasons for **institutionalization of residents at 'pay and stay' homes are desertion by** the family members, abuse by adult children, childlessness and elderliness own preferences to live away from children. Nalini (1997), in her study older people joins old age homes to avoid differences of opinion and frequent domestic conflicts with their children.

Dandekar (1996) *The Older person in India,* Society is undergoing rapid transformation under the impact of industrialization, urbanization, technical change, education and globalization. In Maharashtra, 19 Old Age Homes were studied by Dandekar (1996). She found that the main reason for the aged moving into old age home was the lack of proper care for them within the family set-up. She found that 64% of the inmates have nobody to take care of them and 45% of them had no money to support themselves. Ramamurti (2001) conducted study on 65 old age homes of Andhra Pradesh. His finding showed that most of the older persons joined old age homes because lack of care and financial support. And other reason is strained relationship with family members.

Mishra (2007) conducted a study in Orissa and revealed that majority of the inmates stated that lack of money and care in the family drove them to take shelter in the old age homes. Being in constant touch with friends, good friendship with the co-residents and engagement in activities within the old age homes were also contributing factors towards their satisfactory lives in the old age home. They are not in a mood to go back to their children or to look for any other alternatives. For many of inmates stated that the old age home became an ideal place for them to stay.

Sandhu and Arora (2003), the study was conducted in the old age homes of Amirtsar, Punjab. The study concludes that inmates are fully satisfied of their stay in the old age homes in Amritsar District. The inmates are enjoying their institutional life. They did not feel bad about institutionalization, rather they expressed their opinion that more old age homes are needed and society should make arrangements for institutionalization of older person. This study also reveals that the most commonly stated reason by the inmates for shifting to old age home was conflict relations with their sons and daughter-in-laws. (*Help Age India Research and Development* Pp: 24-28)

Das N.P and Shah (2003), A Study conducted with institutionalized older person in Gujarat. Their studies indicated that one third older person have stated that they choose such an arrangement due to familial conflict. It is also concluded that the demand for institutional living arrangements in the face of weakening traditional familial support has increased as grown-up children find it difficult to take care for their ageing parents. (http://prcs-ohfw.nic.in/writereaddata/research/416.htm). Bansod & Paswan (2006), A study has been conducted in Amravati district of Maharashtra. The findings showed that many of the older people left home due to neglect by their children and relatives, while the majority of them adopted old age home as there was no one to look after them. Almost half of the inmates felt that staying at old age home was far more peaceful than staying with families. Older person were satisfied with care provided at the old age home. Results revealed that most of the older persons in the old age home were from rural background, who did not have any land and who were illiterate, widowed and economically dependent. Help Age India Research and Development Journal, Vol.12.

In a study by Help Age India (2007) a survey of 30 old age homes in Delhi and the National capital region conducted and revealed that family problems had prompted 70 percent of old age home inmates to seek

the refuge of such homes, 10 percent of the inmates opted for these homes because their children lived abroad, 10 percent did so because they had only daughters and could not live with them and another 10 percent had never married and had no children to live with (available at http://www.indiatogether.org/ 2008/march/soc-oldage.htm)

A M.Phil's Thesis on Institutionalized older person in Punjab-A Sociological Study of Old Age Homes in Jalandhar City, by Isha (2009). The study concludes that majority of the older person having more close relations with their daughters as compared to their sons. Her study also reveals that although older person have bad/conflicting relations with their sons but still they prefer to give their property to their own sons only rather than their daughters. Further, study also shows that most of the older person were satisfied with the institutional facilities and services being provided to them in old age homes and also do not want go back in their families.

In a book called "New Dimensions of Older person Care in Current Context: Role of Old Age Homes" by Lakshmanaswamy, T(eds) article titled Population Dynamics and Human Development Opportunities and Challenges by Bharti (2010). In Hyderabad, an empirical study has been conducted on institutionalized older person. Her study concluded that majority of the inmates stated that they do not have economic security, so have to financially depend on their children for their daily needs. The study further, shows the inmates were not getting any personal care back in their own families. Thus, this is the main reason to shift the old age home. Nalini (2000) also reveals that some of the respondents, had "feeling of insecurity," "Loss of dignity" and "Lack of emotional support" when neglected or ignored by the family opt for old age homes.

Tanuja Mohapatra (2011). The objective of the study is to analyze the socio-economic and demographic correlates of the living arrangement choices of older persons in Cuttack and Bhubaneswar of Odisha. A quota sample of 140 older people (both men and women) was selected for the study. Data have been collected from various sources like hospitals, geriatric Health Centres, and Old Age Homes. Increasing individualism in youths has resulted in asserting strongly for individual self, and they are in a great hurry to have every source of pleasure ignoring others consideration totally. Such attitudes may lead

to indignity, disgracefulness, embarrassment, dishonour, disheartening, disregard, indifference, and injustice, lack of care, psychological torture and unlimited hostility towards elders leads them towards old age homes. (Pp:51-70)

In an open source, a article on Predictive factors for institutionalization of the older person: a case study by Giovani Firpo Del Duca; Shana Ginar da Silva; Elaine Thume; Ina S Santos; Pedro C Hallal says that the objective of the study is to identify predictive indicators of institutionalization of the older person. The study was carried out with 991 older person individuals in the city of Pelotas, (Southern Brazil). The result shows that the Institutionalization was more frequent in females. Older person with advanced age those who lived without a partner (single, divorced or widow/widower), and those who had no formal schooling or had a functional disability preventing them from performing basic activities for daily living were more likely to be institutionalized. (http://dx.doi.org/10.1590/S0034-89102012000100018)

Sreevals and Nair (2001) concluded that about half of the institutionalized older person had no children and the other half of the inmates joined old age homes due to family problems such as quarrel with sons and daughter-in-laws or other relatives. Further the major findings of this study reveal that most of the inmates were females in the age group 60-75 years. Majority of the inmates were satisfied in the old age home. (Help Age India Research and Development, Pp:10-17). Rani (2001) conducted the study of an institution in Hyderabad, Andhra Pradesh and concluded that majority of the inmates are above 70 years and from nuclear type of family. Her findings showed that most of the inmates came to stay in the old age home because there was nobody to take care of them or they could not offer to sustain themselves elsewhere. The main reason to opt for old age homes is socio-economic backgrounds of older inmates and there was nobody to take care of them. She examined that most of the inmates have no problems at all in the institution and there is a need for such institutions which honestly takes care of the aged poor, abandoned and the neglected. Majority of the inmates liked to continue to live in these institutions, till they die. (Ageing and Human Development: Global Perspectives edited by Modi, etl(eds) (312-321)

Nayar (1992) indicated that the commonly held view that the aged in general enjoyed power and authority in rural society did not find much empirical support. Age did not confer either automatic headship in the family or status and authority. Other factors are also now playing an important role like health, presence of spouse, and an obedient daughter-in-law and above all, the ability to get along with the members of the family. Participation of the old in the family decision-making was also related to owing property or contribution to the family budget.

Bhatia (1983), revealed the adverse effect of reduced income and pointed out that lower income was associated with other personal problems like loss of status and meaningful social relationship. Gomathi Nayagam's (1987), study of the elderly revealed that higher income, the decision making level becomes high; the low income group suffer from malnutrition, lack of care, ignorance either of their own physical ailment or availability of health care facilities. Decision making level is low among the least educated whereas the highly educated influence decision making of the nursing home. Data analysis was performed by using hermeneutical circle. The results revealed the basic needs, the psychological needs, the self-fulfillment and the 'needs and wants' of older people. The results showed that the needs of older people were varied as individuals are unique. In general, the basic needs are for survival, and the needs of families, communications, personalized activities, and encouragement which might have the conductive function for older people to live a happy later life.

Anindya Jayanta Mishra (2007) author considered 30 old age homes in Orissa for the study. The study is conducted within the framework of Activity theory. Author identifies factors for leaving families such as forced to leave home by children, lack of money, nobody at home to take care, ill treatment by family members, disagreement with sons, continuous conflicts with daughter in law, Income of the sons were not sufficient to run the family and older people does not want to be burden for their children and therefore decided to move into old age homes. And other reasons are older people found difficult to adjust with family members in old age. Some older persons are not able to work due to poor health and aging. So as they were could not maintain their daily expense, and they have no other options so moved to old age

homes. Further, When the gender differences were taken into consideration, author found that 52.2% of the female residents had joined old age homes because there was no choice to go to anywhere compare to their counter parts 34.4% male residents of old age homes due to the same reason, The Indian Journal of Social Work (564-565).

Pinto et.al. (1996) conducted study in Mangalore. Study shows that lack family support, death of spouse, Migration of the children were the reasons for admitting old age homes. The study also shows that the QOL of the older person more dependent on the care taken at home rather than being in the old age home without emotional support of family.

Theoretical Framework

Maslow's hierarchy of Needs theory and Activity theory provides a theoretical background for this research paper.

Activity theory

Activity theory argues that staying mentally and physically active will increase happiness among older people. Activity theory suggests that adults that remain active, physically and mentally, throughout their lives will age successfully. Older persons whose continued participation in social activities, part-time work, travel, and/or hobbies find greater satisfaction throughout their later years. The activity theory disregards the physical and cognitive limitations, disabilities, disease, cultural diversity, and socio-economic status of the older persons. Older people need to be active in family, group and community that boosts their self esteem.

The activity theory of aging 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. The theory assumes a positive relationship between activity and life satisfaction. Activity theory reflects the functionalist perspective that the equilibrium, an individual develops in middle age, should be maintained in later years. The theory predicts that older adults that face role loss will substitute former

theory of aging. Havighurt who propounded the activity theory contends that there is a positive correlation between activity and mental and social adjustment. He holds that the role crisis created by retirement is overcome by absorbing new roles. He calls it has role flexibility. The disengagement model suggests that it is natural for the elderly to disengage from society as they realize that they are ever nearer to death. Since the primary role of individuals is to work or raise families, the elderly will face internal conflicts after retirement when they are separated from these roles. Anindya Jayanta Mishra (2007), People cannot be happy unless they stay socially active. People after retirement; try to fill in their vacant time by engaging in some kind of activities. These help in maintaining the mental and physical health of the old. {pp-561-562)

Maslow's hierarchy of Needs Theory

According to Maslow all needs of human beings can be grouped under five heads and can be arranged in hierarchical order going from the higher need of self actualization down to the physiological/basic needs. Maslow (1970) attempted to explain motivation as a developmental process. He believed motivational needs to be cross-culturally common to all human beings. In working with the older person this framework can be useful in determining whether there are indications such as are the elder's basic needs being met? Is the elder safe and protected? Or Is the lack of basic needs and security needs leads them to leave home?

Maslow's theory holds that human beings are motivated by unsatisfied needs; lower needs take precedence over higher needs and must be satisfied first. When a need is mostly satisfied it no longer motivates and the next higher need takes its place. Many of older people have unsatisfied needs in the hierarchy's first four levels. People who are homeless, for example, are focused at the most basic physiological needs. Many other clients are focused on safety needs.

ABRAHAM MASLOW
HIERARCHY OF NEEDS

Maslow, A. Motivation and Personality (2nd ed.) Harper & Row, 1970.

SELF-ACTUALIZATION
Pursue Inner Talent Creativity Fulfilment

SELF-ESTEEM
Achievement Mastery Recognition Respect

BELONGING - LOVE
Friends Family Spouse Lover

SAFETY
Security Stability Freedom from Fear

PHYSIOLOGICAL
Food Water Shelter Warmth

Physiological needs: Older person need to have shelter, food, drinks and warmth for them to be able to face the challenges in old age. The family is defined as a social, economical and cultural unit. As in many collective societies, family system is still dominant in the Indian society and older persons are considered the pillars of the family. Hence, the cultural and traditional beliefs of the Indian society expect and necessitate that basic needs, care, protection and respect for the older persons should naturally be provided. On the other side, the pattern might be weakened due to disintegration of joint family system emerged nuclear families. The family could contribute to fulfil the basic needs of older people's and At the same time if family is unable to fulfil the basic needs of older person in poor families where especially male married children's are unemployed or engaged in low income activities. If **Physiological needs** deprived to older person can cause illness, hoarding behaviours. In Maslow's hierarchy of needs, it showed that one level will not be sought until the lower level is covered.

Safety needs: Older person need financial security, care and protection of their own well being to contribute towards family and community. Older people in India face many problems. They are unable to save money for their old age and have little to live on when they stop working. Poor diet, inadequate housing, bad health, lack of economic security and isolation often contribute to their poverty. Many older people are forced to work at very old age, and they quit working only when they are physically or mentally unable to continue. Earning a living remains the priority to them. The poor older individuals seem to be struggling for survival. Older individuals need to have extra work to support themselves or their families. In India, older person were economically insecure and dependent on family for care and security. A few of them have social security or insurance because majority of the older person are illiterate and lack of awareness about security and welfare programmes.

Older people used to retire to give chances for the younger, even if they might still have the capability to continue working. A very little amount of pension is provided for the older in organized sectors whereas these older person who had worked in unorganized sectors little or no pension. By applying Maslow's hierarchy of needs on older people, until the basic necessaries of life are not full filled, care and protection are more or less obligatory in older people's later life despite the needs of older people could be diverse depending on their social environment. Moreover, older people are more focused on basic needs rather safety needs and psychological needs which are more advanced, and self-fulfilment needs are least followed. If safety needs were deprived, older person can lead to neurosis, emotional and life insecurity.

Social Needs: Older person need to be accepted in their communities and not be discriminated. The Older person needs to have support from family and their fellow community members. Older person also need to maintain proper relationships with their family members. Older people's willing of love and belonging are intense, and the basic needs and safety needs need to be fulfilled in order to go up into the psychological needs. For example, older people have a strong will and needs of family (love and belonging). Thus, to adjust the pattern, we must realize that older people always desire to be loved and belonging no matter their previous needs are fulfilled completely or not. The older individuals in India constitute a growing group whose needs are inadequately met. Their role in community is not always identified, and their potential contribution to their families is not fully recognized. Social support, meaningful social contacts and active community life are important factors enabling older people to deal effectively with everyday life and maintain healthy aging. In India, traditional attitudes and influence of the extended families are the main features of the family structure. Like many other developing countries, India continues to experience problems in providing the most basic social support services to its population, to help them overcome the vulnerability that might arise from unpredictable conditions of social, economic and political changes. If social needs were deprived to older person that can lead to loneliness and antisocial behaviour.

Esteem needs: Older person need to fulfil their responsibilities. With the needs below met, the older person self esteem through their reputation of being responsible will be increased. Maslow posed two versions - lower and higher esteem needs. Lower form needs are respect from others, for status, recognition, attention, appreciation, dignity, even dominance. Higher form involves the need for self-respect, including such feelings as confidence, competence, achievement, mastery, independence, and freedom. Social and economical factors are formed for having an adverse impact on the situation of older people by gradually weakening traditional family patterns. Due to this older person loss their role and respect in family and became dependent and vulnerable member of family. Along with this deterioration in health status minimized the active role in community has been linked to lower mortality among older person. At the same time, the feeling of burden or unwanted or unproductive due to the behaviour family members naturally decrease the self esteem of older person. If self esteem needs were not full filled, older person might felt deprived, can lead to feelings of inferiority and depression.

Self-actualisation: When all the needs are met, the older person will be fulfilled and content in spite of the tasks that they have to undertake in their old age. This is the last stage in Maslow's Hierarchy. Maslow's Hierarchy of Needs states that to reach self-actualization the other needs of hierarchy must first be met. If the self-actualization needs are deprived to older person, it can cause feelings on lack of meaning in life. Maslow posited that as we become more self-actualized and self-transcendent we become wiser, knowing what to do in a wide variety of situations. At one point he suggested only about two percent of the world's population is truly, self-actualizing.

In Indian context, family Support for older person provides not only companionship and emotional reassurance or support but also practical assistance. People who are homeless, for example, are focused at the most basic physiological needs. Many other clients are focused on safety needs. In other words, if hungry, we scramble for food; if unsafe, we are continuously on guard; if isolated and unloved, we constantly are seeking love from other people or groups; if a low sense of self-esteem, we can be defensive or seek other ways to compensate. In India, older populations of middle and poor family's laid importance on physiological needs, safety and security needs are prominent.

Goebel and Brown (1981) the study found that the physiological need in the late old age further rises and is significantly higher than those of two middle age groups and early old age group, but significantly lower than those of late young group and early young group. The need for security is found to rise significantly in early old age and becomes the highest in the late old age. In old age there is a significant decline in need for self actualization and a significant increase in the physical and security needs (Hardeo Ojha and Meena Pramanick). These findings reflect trends similar to those theorized by developmental psychologists such as Buhler (1967) who suggests that there is a regression in need satisfaction during old age and Havighurst (1972) who suggests that the developmental tasks of old age are more oriented towards maintenance than expansion. The empirical results indicate that there is a strong positive relationship between income and happiness for low income households group, and the Effect of Income on Happiness is less relate to high income households group.

Operational Definitions:

Older Person: In this paper, "Older persons" defined in this study are those men and women aged 60 years and above.

Family: A fundamental social group in society typically consists of one or two parents and children.

Joint Family System: Iravati Karve defines joint family as "a group of people who generally live under one roof, who eat food cooked at one hearth, who hold property in common and who participate in common family worship and are related to each other as some particular type of kindred.

Factors of leaving families: In this paper, Factors for leaving families implies those causes which affects the older persons to leave their families.

Activity theory: The activity theory of ageing propounds that engaging in some kind of activity or work facilitates older people to adjust to the later years of their life, (Fennel, Phillipson and Evers,1988). In this paper Activity refers successful **aging** occurs when older adults stay active physically, mentally and socially.

Basic needs: In this paper, a basic need refers needs of living such as food, shelter, health of older persons.

Security Needs: In this paper, security needs refers the safety, care, financial, emotional security, Social security and affection of family, friends, and relatives. Also includes social contacts and participation in community activities.

Esteem needs: Esteem needs refer to the need for respect, self confidence. Here in this paper Esteem needs means, it is a basis for the human desire we all have to be accepted and valued by others**.** And it is equally important how we value ourselves**.** Likewise older people need to accept and respected by themselves, by their family, community and Society.

Old age homes: Juvenile Justice (Care and Protection of Children) Act, 2000, Chapter 1 "Children's home" means an institution established by a State Government or by voluntary organisation and certified by that Government under section 34. The same definition has been adopted in the study.

Objectives of the Paper

1. **Know the demographic profile of the older persons.**

2. Analyse the factors **responsible for leaving the families.**

3. Suggest measures to improve the living conditions of the older persons**.**

Method: The present paper is based on a historical research design. The study is based on secondary data. Secondary data collected through books, journals, previous studies, suggestions and discussions with the guide and experts. The paper confined to older persons aged 60 years and above.

Demographic profile

Global Ageing scenario: The projected size and growth of older person population is a major concern for demographers and policy makers throughout the world. The population of the world stood at around 6.1 billion in the early 21st century and is projected to increase to 9.4 billion in 2050 and 10.4 billion in 2100. However, the growth of the older person population is much higher than that of general population (UNFPA, 2008). The sixty plus population accounted for 10.4 per cent in 2008 and more than 8 per cent are in the 65 plus age group. The proportion of older person aged 60 and above is expected to grow from 10.4 per cent in 2008 to 14.6 per cent in 2025 and 21.1 per cent in 2050 respectively.
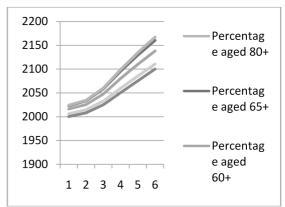
Among the older person, the oldest old (80+) is likely to increase its proportion from just 1.1 per cent in 2000 to 3.4 percent in 2050 and 7.1 in 2100. Overall the female older person's percentage is more than the male older person. This is a clear indication of feminisation of ageing (UNFP A, 2005; UN, 2008). According to present indications, most of this growth will take place in developing countries and over half of it will be in Asia. The two major population giants of Asia, namely India (lrudaya Rajan, Mishra and Sarma,1996; 1999; Rajan, 2000; 2001) and China (lrudaya Rajan, 1994) will contribute a significant proportion of this growing older person (lrudaya Rajan, Sarma and Mishra, 2003).

The number of persons age 65 or older in the world is expected to expand from an estimated 495 million in 2009 to 974 million in 2030. This will result in a world population in which 12 percent will be 65 years of age or older by the year 2030, compared with 7 percent today. Moreover, as per projections for the next ten to fifteen years, more than sixty countries will reach or cross more people aged sixty-five and over (United Nations, 2007; 2009, Kinsella and Velkoff, 2001).

Global Ageing Scenario: UN Estimates. Table-1

Year	Population (Billion)	Percentage aged 60+	Percentage aged 65+	Percentage aged 80+
2000	**6.1**	**9.9**	**6.8**	**1.1**
2008	**6.7**	**10.4**	**8.0**	**1.2**
2025	**8.0**	**14.6**	**10.8**	**1.7**
2050	**9.4**	**20.7**	**15.1**	**3.4**
2075	**10.1**	**24.8**	**19.1**	**5.3**
2100	**10.4**	**27.7**	**22.0**	**7.1**

Source: United Nations, 2008

Global Ageing Scenario: UN Estimates Chart-1

Aging in Asia

The population of Asia is growing both larger and older. Demographically, Asia is the most important continent in the world. Asia's population, currently estimated to be 4.2 billion, is expected to increase to about 5.9 billion by 2050. Rapid decline in fertility, together with rising life in expectancy, are altering the age structure of the population so that in 2050, for the first time in history, there will be

roughly as many people in Asia over the age of 65 as under the age of 15 years.(James P Smith and Malay Majumundar). Asia accounting for a significant share of the world's aged people. In India, the proportion of the population aged sixty years and above was 88 million in 2009 and expected to increase to around 315 million by 2050.In view of this situation, the twenty first century may be called as the 'Era of Population Aging' (Prakash, 1994) with a serious concern for the policy makers all over the world.

World Population- Projected Distribution of Aged Population 60 years and above for the selected Asian Countries. Table-2

Countries	1990		2000		2025		2050	
Bangladesh	5330	4.8	6878	5.1	17893	9.5	4506	19.1
China	10046	8.81	26857	10.1	267786	18.2	403342	25.9
India	60724	7.17	9994	7.8	1666511	12.1	328315	20.2
Indonesia	11488	6.4	14910	7.2	32705	12.3	63254	20.8
Malaysia	1022	5.7	1436	6.5	4005	13.1	8273	22.7
Philippines	3041	4.9	4248	5.4	11871	10.3	26126	18.2
R.P Korea	3302	7.7	5007	10.7	11753	22.1	15481	28.6
Sri Lanka	1420	8.4	1758	9.2	4237	17.8	6813	25.6
Thailand	3177	5.6	4968	7.51	1476	14.2	21102	23.1

Source: World Population Projection 1994, Oxford University Press

Aging in India

In 1947, when India became independent from British rule, life expectancy was around 32 years adding 9 years during the first half of the twentieth century. Improvements in public health and medical services have led to significant decreases in mortality rates among all ages. Changing age structure is rooted in the combined impact of increasing life expectancy and declining fertility. Life expectancy at birth in India climbed from 37 years in 1950 to 65 years in 2011, reflecting declines in infant mortality and survival at older ages in response to public health improvements (Arokiasamy et al., forthcoming; Haub and Gribble 2011). The 2001 Census has shown that the older person population of India accounted for 77 million and 103.84 million in 2011. In 1961, the older person population was only 24 million;

it increased to 43 million in 1981 and to 57 million in 1991. The proportion of older person persons in India has risen from 5.63 per cent in 1961 to 6.58 per cent in 1991 (Irudaya Rajan, Mishra and Sarma, 1999) and to 7.5 per cent in 2001 (Irudaya Rajan, 2006). And now it is 8.6% according to 2011 census. India's older population will increase dramatically over the next four decades. The share of India's population ages 60 and older is projected to climb from 8 percent in 2010 to 19 percent in 2050, according to the United Nations Population Division (UN 2011).

Decadal Growth of older Population in India from Last Thirty Years in Percentage

Table-3

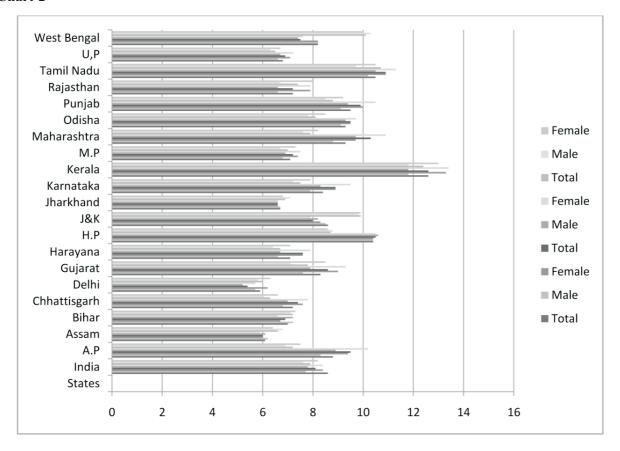| National Surveys	Total
Census of India 1991	6.8
Census of India 2001	7.4
Census of India 2011	8.6

Source: Census of India 1991, 2001, 2011

Percentage of population in the age group 60 years and above to total population by Sex and residence, India and bigger States, 2011

Indian bigger States	Total	Male	Female	Total	Male	Female	Total	Male	Female
India	8.6	7.7	8.4	8.1	7.8	8.4	7.9	7.6	8.2
A.P	8.8	8.3	9.4	9.5	8.9	10.2	7.2	6.9	7.5
Assam	6.1	6.2	6.0	6.0	6.1	5.9	6.6	6.8	6.4
Bihar	7.0	7.2	6.7	6.9	7.2	6.6	7.2	7.1	7.3
Chhattisgarh	7.2	6.8	7.6	7.4	7.0	7.8	6.3	6.0	6.6
Delhi	5.9	5.7	6.2	5.4	5.2	5.7	6.0	5.8	6.3
Gujarat	8.3	7.6	9.0	8.6	7.9	9.3	7.8	7.1	8.5
Harayana	7.1	6.6	7.6	7.6	6.7	7.9	6.7	6.4	7.1
H.P	10.4	10.4	10.4	10.5	10.6	10.5	8.7	8.8	8.6
J&K	8.6	8.5	8.3	8.0	8.2	7.9	9.9	9.8	9.9
Jharkhand	6.7	6.7	6.6	6.6	6.6	6.6	6.9	7.1	6.8
Karnataka	8.4	7.9	8.9	8.9	8.3	9.5	7.5	7.2	7.9
Kerala	12.6	11.8	13.3	12.6	11.8	13.4	12.4	11.8	13.0
M.P	7.1	6.8	7.4	7.2	6.9	7.5	7.0	6.7	7.3
Maharashtra	9.3	8.8	9.7	10.3	9.7	10.9	7.9	7.6	8.2
Odisha	9.3	9.1	9.5	9.5	9.3	9.7	8.1	7.8	8.5
Punjab	9.5	9.1	10.0	9.9	9.4	10.5	8.8	8.5	9.2
Rajasthan	7.2	6.6	7.9	7.2	6.6	7.9	7.4	6.7	8.0
Tamil Nadu	10.5	10.2	10.9	10.9	10.5	11.3	10.7	9.7	10.5
U.P	6.8	6.6	7.1	6.9	6.7	7.2	6.5	6.3	6.7
West Bengal	8.2	8.2	8.2	7.5	7.4	7.6	10.1	10.3	10.0

Source: Census of India- 2011

Percentage of population in the age group 60 years and above to total population by Sex and residence, India and bigger States, 2011
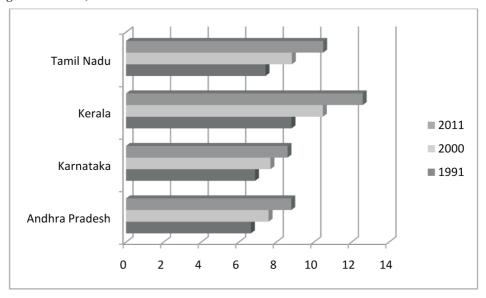
Chart-2

Aging in South India

India has long been described as a nation of the young people, It is true also but the country's older population grew 27 million between 2001 to 2011. That's 35% grew over a last decade. India's north-eastern states have the least proportion of older people; Arunachal Pradesh is the lowest with 4.6% people above 60 years. South Indian states have the highest proportion of older people. Kerala leads the chart with 12.6%, followed by Goa 11.2% and Tamil Nadu with 10.4%. Andhra Pradesh and Karnataka cover 8.8% and 8.4% of older population respectively.

Percentage of older Population of Decadal Growth in South India
Table-5

South Indian States	1991	2000	2011
Andhra Pradesh	6.65	7.59	8.8
Karnataka	6.87	7.69	8.6
Kerala	8.81	10.48	12.6
Tamil Nadu	7.43	8.83	10.5

Centre for Monitoring Indian Economy (CMIE) India's Social Sector, Fe-1996 p2

Office of the Register General, India.2004

Conclusion and Suggestions

From the literature one can find that majority of the inmates left family because there is no choice to go elsewhere. Lack of care, financial insecurity and poor physical health and too aging to work are the other important reasons for leaving families. Within the framework of Maslow's hierarchy theory and Active theory we can understand that In India, majority of sons were married and unemployed or involved in low income economic activities. So they were unable to full fill the basic needs such as food, cloth, shelter and health care of older parents. And also lack of security needs such as financial, care, safety and emotional needs of older people which lead to create frequent conflicts, quarrels with daughter in law's/Son in law's, disagreements with sons, lack adjustment among family members and ill- treatment

of older parents in family. All these family situations and lack of involvement in family, community activities break the social contacts of older people which lead to lower self esteem among older people. Finally, above situations forced older people to leave family and no choice to go elsewhere so they will join old age homes for their survival.

People cannot be happy unless they stay socially active. People after retirement; try to fill in their vacant time by engaging in some kind of activities. This help in maintaining the mental and physical health of the old. Older people can engage themselves in leisure activities which make them to stay active and more connected with family, group and community and it helps to reduce loneliness and isolation.

At this point, the intervention of social workers can contribute to promote social change by taking care of them and empowering them to enhance their well-being. Apart from the promotable role role as social workers, they also help to solve problems. Today, many of older people may not have problems on housing or health care, but more commonly, the problems of their loneliness and social isolation which contributes negatively to their later life (Victor et al., 2009). It is socially necessary to pay attention to this group of people. This is not only a specific social problem for one small part of the society or country, but also for the whole society and the world. Social workers intervention in older people and society could contribute to the well-being of older people's later life. Here, we can adopt Social work methods such as Case work, Group work, Family counselling, Spiritual counselling to motivate older people to understand the values required to lead a comfortable life and to remove their stress and stereotype negative attitude towards aging. Able-bodied older persons are encouraged to involve themselves in micro-income generation activities. Effective medical and health insurance need to introduce specifically for older people. Social work trainees can create awareness among public about the problems of age and role of family, community and Government towards the needs of the older persons. There is very much need to sensitize the older persons about various social security and welfare schemes.

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