



## THE AGED: A SOCIOLOGICAL PERSPECTIVE, A CASE STUDY OF VIVEKANANDA OLD AGE HOME, MAYAKONDA, DAVANAGERE DISTRICT, CHENNAGIRRI TALUK.

DR.NAGAPPA.V M.A., M.Phil., L.L.B., Ph.D.

ASSOCIATE PROFESSOR AND RESEARCH GUIDE  
DEPARTMENT OF SOCIOLOGY  
GOVERNMENT ARTS COLLEGE [AUTONOMOUS] CHITRADURGA -577501  
KARNATAKA

### ABSTRACT

*“Old age is not curse but it is gift of nature”. If you not welcome to that it will come. A man's life is normally divided into five main stages namely infancy, childhood, adolescence, adulthood and old age. Physical and mental. The marks of old age are so unlike the marks of middle age that legal scholar Richard Posner suggests that, as an individual transitions into old age, he/she can be thought of as different persons "time-sharing" the same identity. Sri Gayathri Gramina Vidhyasamste [R] is one of the Rural education institution. It is non government voluntary association. It provide service to society under its own aims. Vital role of this institution is implementation of education system in surrounding Mayakonda village. [Davanagere district, Chennagiri Taluk, Karnataka].*

**Key Words:-** Old age, Senior citizen, old age home, negligence, caste, religion

### INTRODUCTION

**“Old age is not curse but it is gift of nature”.** If you not welcome to that it will come. A man's life is normally divided into **five main stages** namely *infancy, childhood, adolescence, adulthood and old age*. In each of these stages an individual has to find himself in different situations and face different problems. The old age is not without problems. In old age physical strength deteriorates, mental stability diminishes money power becomes bleak coupled with negligence from the younger generation.

Old age is not a definite biological stage, as the chronological age denoted as "**old age**" varies culturally and historically.

Infancy and childhood are periods of dependence. One is normally at the mercy of one's parents. In the later stage of childhood and during the period of adolescence how circumstances make a few of them to become delinquents, we have already examined. It is during the adulthood that an individual has to bear the main brunt of life. Old age is not free from problems. Though the from the point of view of wider society the problems of old age are comparatively less, from the stand point of the individual the problem's are not less significant.

### Meaning and Definition

**Old age** refers to ages nearing or surpassing the life expectancy of human beings, and is thus the end of the human life cycle.

Terms and euphemisms include **old people, the elderly, seniors, senior citizens, older adults and the elders**

**The United Nations:** - Explained that 65+ years may be usually denoted as old age.

**World Health Organization (WHO):**- set 55 as the beginning of old age. At the same time, the WHO recognized that the developing world often defines old age, not by years, but by new roles, loss of previous roles, or inability to make active contributions to society.

## Who are the Aged

The distinguishing characteristics of old age are both

Physical and mental. The marks of old age are so unlike the marks of middle age that legal scholar Richard Posner suggests that, as an individual transitions into old age, he/she can be thought of as different persons "time-sharing" the same identity.

These marks do not occur at the same chronological age for everyone. Also, they occur at different rates and order for different people. Marks of old age can easily vary between people of the same chronological age.

A basic mark of old age that affects both body and mind is "slowness of behavior". This "slowing down principle" finds a correlation between advancing age and slowness of reaction and physical and mental task performance. However, studies from Buffalo University and Northwestern University have shown that the elderly are a happier age group than their younger counterparts.

1. Bone and joint.
2. Chronic diseases.
3. Chronic mucus hyper secretion (CMH) "defined as coughing and bringing “
4. Dental problems.
5. Digestive disorders
6. Essential Tremor (ET) is an uncontrollable shaking in a part of the upper body.
7. Eyesight.
8. Falls. Old age spells risk for injury from falls
9. Gait change.
10. Hair usually becomes grayer
11. Hearing. By age 75 and older,
12. Hearts can become less efficient
13. Immune function. Less efficient immune function
14. Lungs might expand less well, thus, they provide less oxygen.
15. Mobility impairment or loss.
16. Sensuality and sexual pleasure.
17. Skin loses elasticity,
18. Wounds and injuries take longer to heal.
19. Wounds and injuries
20. Sleep trouble
21. Taste buds diminish so that by age 80 taste buds are down
22. Over the age of 85, thirst perception decreases
23. Urinary incontinence
24. Voice. In old age,

## Old Age Homes

Impact of changing concepts of social, economic, and internal feelings the old age people not capable to fulfilling his essential needs himself. So some NGOs, some voluntary associations and Government institutions established the Old Age homes for the protection of Old age persons.

First the Christian Missionaries initiated the old age homes like “**Home for the care of the old**”. In 1830 **Little sister organization** Kolkatta, In 1978 **Elpage India**, In 1980 **Age Care India** so and so. These are giving service

to old ages like food cloth, medicine, rest, housing, social and economic support. The Age care of India celebrated every year “**Old age Day**” in November 18<sup>th</sup>.

### **1. Physiological Problems:**

Old age is a period of physical decline. Even if one does not become sans eyes, sans teeth, sans everything, right away, one does begin to slow down physically. The physical condition depends partly upon hereditary constitution, the manner of living and environmental factors. Vicissitudes of living, faulty diet, malnutrition, infectious, intoxications, gluttony, inadequate rest, emotional stress, overwork, endocrine disorders and environmental conditions like heat and cold are some of the common secondary causes of physical decline.

Due to the loss of teeth, the jaw becomes smaller and the skin sags. The cheeks become pendulous with wrinkles and the eye lids become baggy with upper lids over hanging the lower. The eyes seem dull and lusterless and they often have a watery look due to the poor functioning of the tear glands. Loss of dentures affect speech and some even appear to lisp.

The skin becomes rough and loses its elasticity. Wrinkles are formed and the veins show out prominently on the skin. Perspiration is less profuse and other skin pigmentation appears as the age advances. The hair becomes thin and grey, nails become thick and tough. Tremors of the hands, forearms, head and lower jaw are common. Bones harden in old age, become brittle and are subject to fractures and breaks.

Changes in the nervous system have a marked influence on the brain. Atrophy is particularly marked in the spleen, liver and soft organs. The ratio of heart weight to body weight decreases gradually. The softness and pliability of the valves change gradually because of an increase in the fibrous tissue from the deposits of cholesterol and calcium. The aged are also prone to heart disease, other minor ailments and chronic diseases.

Due to the weakening regulatory mechanism, the body temperature is affected. Therefore the old persons feel the change in climate more profoundly than others. They suffer from digestive troubles, insomnia. Due to dental problems they are not able to chew or swallow well.

The old are more accident prone because of their slow reaction to dangers resulting in malfunctioning of the sense organs and declining mental abilities, the capacity to work decreases. Eyes and ears are greatly affected Changes in the nerve centre in the brain and retina affect vision and sensitivity to certain colors gradually decreases. Most old people suffer from farsightedness because of diminishing eye sight.

With advancing age, the sexual potency decreases along with a waning of secondary sex characters. Women go through menopause generally at the age of 45 – 50 years accompanied by nervousness, headaches, giddiness, emotional instability, irritability and insomnia. The movements of the aged are fewer co-ordinates. They get fatigued easily. Due to lack of motivation, they do not take interest to learn new skill and become lethargic. Above all visits to the doctor becomes a routine work for them.

### **2. Psychological Problems:**

Mental disorders are very much associated with old age. Older people are susceptible to psychotic depressions. The two major psychotic disorders of older people are senile dementia (associated with cerebral atrophy and degeneration) and psychosis with cerebral arteriole sclerosis (associated with either blocking or ruptures in the cerebral arteries). It has been observed that these two disorders account for approximately 80% of the psychotic disorders among older people in the civilized societies.

#### **(1) Senile Dementia:**

Older people suffer from senile dementia. They develop symptoms like poor memory, intolerance of change, disorientation, rest lessens, insomnia, failure of judgment, a gradual formation of delusion and hallucinations, extreme-mental depression and agitation, severe mental clouding in which the individual becomes restless, combative, resistive and incoherent. In extreme cases the patient become bed ridden and resistance to disease is lowered resulting in his days being numbered.

#### **(2) Psychosis with cerebral Arteriosclerosis:**

This is accompanied by physiological symptoms such as acute indigestion, unsteadiness in gait, small strokes resulting in cumulative brain damage and gradual personality change. Conclusive seizures are relatively common. This is also associated with symptoms such as weakness, fatigue, dizziness, headache, depression, memory defect, periods of confusion, lowered efficiency in work, heightened irritability and tendency to be suspicious about trivial matters. Forgetfulness is one of the main psychological problems of old age. General intelligence and independent creative thinking are usually affected in old age.

**3. Emotional Problem:**

Decline in mental ability makes them dependent. They no longer have trust in their own ability or judgments but still they want to tighten their grip over the younger ones. They want to get involved in all family matters and business issues. Due to generation gap the youngsters do not pay attention to their suggestion and advice. Instead of developing a sympathetic attitude towards the old, they start asserting their rights and power. This may create a feeling of deprivation of their dignity and importance.

Loss of spouse during old age is another hazard. Death of a spouse creates a feeling of loneliness and isolation. The negligence and indifferent attitude of the family members towards the older people creates more emotional problems.

**4. Social Problems:**

Older people suffer social losses greatly with age. Their social life is narrowed down by loss of work associated, death of relatives, friends and spouse and weak health which restricts their participation in social activities. The home becomes the centre of their social life which gets confined to the interpersonal relationship with the family members. Due to loss of most of the social roles they once performed, they are likely to be lonely and isolated severe chronic health problem enable them to become socially isolated which results in loneliness and depression.

**5. Financial Problem:**

Retirement from service usually results in loss of income and the pensions that the elderly receive are usually inadequate to meet the cost of living which is always on the rise. With the reduced income they are reversed from the state of "Chief bread winner to a mere dependent" though they spend their provident fund on marriages of children, acquiring new property, education of children and family maintenance. The diagnosis and treatment of their disease created more financial problem for old age.

**BRIEF HISTORY OF VIVEKANANDA OLD AGE HOME**

**Sri Gayathri Gramina Vidhyasamste [R]** is one of the Rural education institution. It is non government voluntary association. It is provide service to society under its own aims. Vital role of this institution is implementation of education system in surrounding **Mayakonda** village. [Davanagere district, Chennagiri Taluk, Karnataka].

The Institution started in 1986, In 1999 started Orphan school and got admission from 1-7 class. In 2001 the Institution started Vivekananda old age home. In addition to provide job oriented training facilities to unemployed youths about Tailoring, Beauty parlor, Social forest, hand crafts etc.. It is started Self Help Groups, Family Counseling Cell, in Davangere and other Districts. Support to Watershed developments, Social forest, creates general awareness about rain harvesting.

**VISION & MISSION OF THE INSTITUTION**

1. Establishment of Physiotherapy clinic for old age
2. Establishment of Daycare center for the orphans, mental disorders and death stage peoples.
3. Establishment of Mobile medical center and Nature treatment center
4. Helpline for the seiner citizens
5. Yoga and Meditation campaign
6. Kindergarten, Daycare centers for the working women

Totally the Institution provide service to society and create friendship, harmony, humanity, healthful relationship for the those who are suffer from needs. The Institution honored "**Kitturu Rani Chennamma**" award by Karnataka Government.

## STUDY ABOUT INMATE OF THE AGE HOME

The study enlighten on social, economic, health condition, age, caste, job, reasons, and background of family of inmate of old age home. 26 old ages living in this home, what is the position of home, facilities? Opinions and condition of home.

### OBJECTIVE OF THE STUDY

1. Study about inmates social, economic, health conditions
2. Finding the problems of old ages
3. Finding the suitable reasons for the inmates of old ages
4. Enlighten on the available resources in home for the old age
5. Understanding the relationship of old age with family
6. Gathering the Data from old ages opinion, feelings about the old ages home

### METHODOLOGY AND TECHNIQUES

Collect the data from random sample in Interview, Participant Observation and borrowing the data from secondary data.

### FIELD STUDY

The present study conducted in **Mayakonda village Vivekananda old age home**. The study consisted 20 old age people.

### IMPORTANCE OF THE STUDY

1. Introducing the Social conditions
2. Explaining the Family background
3. Refers to the Economic conditions
4. Provide information about personal reasons of old age people
5. Support for the understanding about Problems of old age people
6. Explaining the Remedies to problems
7. The role of Government and NGOs
8. Provide knowledge to sociologists and researchers about old age people

### PERSONAL BACKGROUND

#### AGE AND GENDER

The study expecting about Social, economic, education conditions, marital status, job opportunities, dignity, rights and responsible. So the age and gender is important for the collecting above data. The study explaining below.

#### AGE COMPOSITION OF THE RESPONDENTS

Table-1

AGE	RESPONDENTS NUMBER
50-60	04
61-70	09
71 Above	07
Total	20

Table-1 refers to the different age of old age people of old age home, 61-70 age group is highest and 50-60 group lowest old age people.

### SEX COMPOSITION OF THE RESPONDENTS

The sex composition is important in the role of explaining the position of the sex equality, rights, cultural, social, biological, role behavior, feelings. How the society provide the status to both sex in socially, economically and culturally.

### GENDER OF THE RESPONDENTS

Table-2

GENDER	RESPONDENTS
MALE	11
FEMALE	09
Total	20

Table-2 explaining the gender of old age people the highest is male 11 and lowest is female 09 respondents.

### MARITAL STATUS

Marriage is vital stage of human life. The marriage system provide mutual rights and responsible to both. In this system both are must living mutual understanding and provide healthful socialization to new generation. The family growing on both responsible. Sufficiency is important feature in family. That is support to development of society.

### MARITAL STATUS OF THE RESPONDENTS

MARITAL STATUS	MALE	FEMALE	TOTAL
MARRIED	10	09	19
UNMARRIED	01	--	01
WIDOW/WIDOWER	--	--	--
Total	11	09	20

Table-3 refers married respondents' highest male 10 and second place female 09, and unmarried respondents belong to male 01 but no widow and widower.

### CASTE AND RELIGION

Caste is important scale for the identification of human life's, status, social, economic, political, job, marital status belong to caste.

### CASTE COMPOSITIONS

Tanle-4

Respondents Caste	Number of Respondents
General	09
OBC	10
SC/ST	01
Total	20

Table-4 refers to the castes of respondents in old age home, other backward class first place 18, second place general 09, remaining SC.ST-01.

### RELIGION

Table-5

Religion	Number of Respondents
Hindu	19
Islam	01
Christian	00
Total	20

Table=5 explaining the Religion of inmate of old age home 19 peoples belong to Hindu religion, 01 belong to Islam other religion nil.

### **NATIVE- RURAL / URBAN**

Life style, methods of life, stage, job, social mobility these are different in Rural area and Urban area.

Table-6

Rural / Urban	Number of Respondents
Rural	09
Urban	11
Total	20

Table-6 refers to the native of old age people in old age home, highest belong to urban-11 and least rural -09.

### **FAMILY BACKGROUND**

Family is a important institution in society, It is basic to all human beings, it is support to development of personality, agency of socialization. So we identified the family of background of old age people.

Table-7

Social-Economic-Background	Number of Respondents
Good	05
Medium	07
Poorsw	08
Total	20

Table-7 explaining the family background of old age people, first place normal-08, second place medium-07, and last place good-05. So poor economic income family is not support to old age people. They are neglect the his old age people.

### **EDUCATIONAL LEVEL OF THE RESPONDENT**

Education is important role in deciding about social , economic job, life style standard of life.

Table-8

Educational qualification	Number of Respondents
Illiterate	10
Primary education	05
Secondary education	04
p.u.c	01
Degree	--
Total	20

Table-8 refers to the education status of old age people, illiterate is highest, and no degree education.

### **OCCUPATION STATUS**

Occupation is important to life leading to everybody job and individual is two face is in same coin. So the study conducted the old age home inmates.

Table-9

Respondents job	Number of Respondents
Daily wage worker	08
Agriculture	09
Handcrafts	03
Government job	--
Total	20

Table-9 explaining about the occupation status of old age people, highest belong to agriculture, lowest handcrafts, but no government job people.

**REASONS FOR THE JOINING TO OLD AGE HOME**

Table-10

Reasons	Number of Respondents
Negligence of children	10
Family conflicts	08
Poverty	04
Death of comrade	01
Total	20

**Table-9** The children negligence is principle reasons for the joining to old age home 10, Second place family conflicts-05, and third reason poverty 04, last reason loss of comrade 01.

**ARE YOU WILLING TO LIVE WITH YOUR CHILDREN?**

Table-11

Willing	Number of Respondents
Yes	07
No	13
Total	20

Table-11 refers to the willing of old age people to live with children, majority old age people not willing 13, only 07 person willing to living with children.

**OPINION BY INMATES ABOUT OLD AGE HOME**

Table-12

Opinion	Number of Respondents
Good	20
Medium	--
Normal	--
Total	20

Table-12 explaining about facilities of old age home all person opinion belongs to good.

**FINDINGS & SUGGESTIONS**

The present study finds some factors about old age conditions and old age home positions. Discussion below.

1. Majority the old age people belong to 61-70
2. The respondents' male is highest
3. Majority respondents neglected by his children
4. Nobody related to Christian religion in old age home
5. All respondents accepted the old age home facilities
6. Decline of joint family increase of single family system is created old age problem, Decline of love and affectionate with family members and colleagues the old age person increased.

**SUGGESTIONS**

1. The young generation must take responsible about his/her parents at old age . because the parents as a guide to youths they provide entire life for the youths future life.
2. The old persons must avoid his evil habits, like alcohol, smoking and other activities. Who must take care about health, and control of stress crisis, insufficiency, tension etc..
3. The government and NGOs must provide medical facilities to old age people under the less expenditure.



## CONCLUSION

The government must provide basic facilities to old age people, and must create general awareness among the youths about old age, provide monthly salary to old age. A National Policy on older persons was announced in January 1999 which identified a number of areas of intervention-financial security, healthcare and nutrition, shelter, education, welfare, protection of life and property for the wellbeing of older persons in the country. A National Council for Older Persons (NCOP) was constituted by the Ministry of Social Justice and Empowerment to operationalize the National Policy on older persons.

Take serious action about control of old age problem, and issue the strict legal actions on youngsters or those who are neglected his parents.

## BIBILOGRAPHY

1. Field study
2. Random sample
3. Direct Interview of respondents
4. Social media, ICT

