

## Understanding Old Aged Challenges: A Comprehensive Literature Review

Dr.Saraswati<sup>1</sup>

---

### Abstract

This paper is emphasized to **Understanding Old Aged Challenges** and it is focusing into Indian family societal changes, it is observed some series of facts that the Indian families are undergoing numerous changes in the last two decades and a series of change occurred to cope the institution of family in the modern world, majorly the changes in the patterns of marriage (age, inter-caste, and divorce rates) has been observed. The paper is tried to see the series of observation among the old age wife and husband, and many cases revealed that the old perception of family had given the elders a platform and has always supportive and caring to the elders but with the new concepts and modernization of the country has had profound impacts on the way family has perceived across the nation.

---

Date of Submission: 07-07-2020

Date of Acceptance: 21-07-2020

---

### I. INTRODUCTION:

(Dommaraju, 2016)evaluated the old age prospectives in his study “**Perspectives on Old Age in India**” The author emphasized that the population of old age people in India is going to increase to 300 million by the year 2050. However, due to the weak institutional welfare systems placed in India, resulting in a substantial detrimental negative impact on the elderly population. The Elderly Population in India mostly depend on their families for their support and care, and the role that the families play in the elderly care is highlight by the two acts that have implemented in India namely ‘National Policy of Senior Citizen, 2011’ and ‘Maintenance and Welfare of Parents and Senior Citizen Act, 2007’, both these acts approach elderly care is essential and suggested to the family members to take care of elders, but the author found that the despite their financial and economic condition are not potential enough to take care of the elders. Therefore, he suggested that there is an urgent need to bring in the aspects of economy and social conditions of the families that has to take care of the elderly too and need to evolve social and public policies that includes family, individual, state and non-state actors to maximum efficiency and to lead to better facilities for old age people in India.

(Menezes & Thomas, 2018)has studied the elderly status in India in his research teamwork “**Status of the Elderly and Emergence of Old Age Homes in India**” the author found that there has been rapid ageing of human population and ageing is entirely a biological process and there is nothing a human can do to prevent ageing. The successful ageing definesas when an elderly gets physical, psychological, functional, and social health. India is one of the fastly growing in developing countries, which leads to the increasing burden of scarce natural resources that we have. The author observed a trend that which points to the decrease in the number of joint families and an increase in nuclear families (families that consists of husband wife and children), the migration is one of the significant chunk, the majority of people migrating to workplaces has also led to decrease in the family values and rise in individuality.

(Y. Kumar & Bhargava, 2014)has studied in his study “**Elder abuse in Indian families: Problem and Preventive actions**” he emphasised that the elderly in India are facing various issues such as loneliness, negligence, lack of treatment and abuse from their family members which includes relating to physical abuse, mental abuse or verbal abuse, financial abuse. These abuses have a profound impact on the psychology of the elders and lead them to harm themselves physically and mentally. In his study has given a new set of questions on what is the significant challenges for the elderly ecosystem? Throughout his study, he found that there is no suitable social security system for the elderly across the country, which is the essential platform for the economics of the elderly, which in turn will lead to better facilities in the future.

(Y. Kumar & Bhargava, 2014; Sooryamoorthy, 2012)has revealed in his study “**The Indian Family: Needs for a Revisit**” That the Indian family has always been a strong, cohesive, and an integral part of the Indian Social structure. The traditional aspects of Indian society are undergoing numerous changes in the modern world. The types of the family (whether it is a joint or a nuclear or an extended), types of marriages

---

<sup>1</sup> ICSSR- PDF Scholor at Kakatiay University, Warangal, Telangana state.

(arranged/love/arranged cum love marriages) are some impacts of the process of modernization on the institution of the family. Families have undergone tremendous changes, some of which are positive. Those changes include improved women's rights, and better conditions for women to live, better care for children, economic independence. The roles, relationships, and functions changed with the advent of the modern age. Therefore, there is an essential need to revisit the system of the family that existed in India and highlight the importance of families in the modern Indian social structure like never before.

(Mokashi & Professor, 2016) has emphasised in his study “**Study of factors compelling elderly to stay in old age homes with respect to Kundapur City**” the old age people are beginning to be despised and hated and forced to leave their own homes by their children and in-laws. The reasons that are important and what leads the elderly to shift from their households to Old age homes include adjustment problems with their children, financial crisis, misbehavior of family members, and lack of emotional support to the elderly. Elders consider Old age homes to be safer because of the lack of abuse they face at home. One elderly individual looks for emotional support, and there is a need to generate emotional support for the elderly. Facilities in the present old age homes have no platform for elderly people to express themselves. There should be made available platforms for elderly people to get emotional support. These should be made in the old age homes itself, and the government should be focused on how to provide institutional support to the elderly and how to make their life better with improved facilities and support mechanisms.

(A. Kumar, 2011) has pointed out through his study “**Changing face of family and its implications on mental health profession in Delhi**,” Families in India have changed a lot. Some of the changes have had a profound positive impact on society, and some have led to negative impacts too. Nuclearization, double family incomes (both the parents tend to work and earn salaries), increasing divorce rates are examples of the claim, as mentioned earlier. For better mental care of mentally ill patients, families are essential. However, with the diminishing importance of families in the present-day scenario, a community based mental health program is impossible. In Delhi, mentally affected people are disabled, and studies have shown that the involvement of families has had positive impacts. Some of the positive impacts include faster healing and better response to illnesses. Therefore, in the present scenario, we need to stress the importance of family and preserve the institution of the family for a better future society.

(Jiloha, 2009) has revealed in his study “**Impact of Modernization on Family and Mental Health in South Asia**,” Modernization has led to various changes in the family structures in South Asian countries. Some of the essential determinants of change include changes in the population, migration, ageing, and retirement, Globalisation. This has led to significant mental health issues in the population residing in South Asian countries. One-fourth of the world population resides in the South Asian countries, and almost one-fifth of the mentally ill patients are native to the South Asian countries. More emphasis is laid on the community mental health programs as it has yielded better results and has led to complete recovery. Also, there is a critical need to bring about an awareness of substance abuse and the abuse of alcohol and cigarettes. A community-based programme should be brought about as it gives better results and also leads to the reduction of stigma related to mental illness and substance abusers and also to show the world that those people can recover and lead a healthy life after they are the cure.

(OECD, 2011) the organization clear that through their study, “**Doing Better for Families Families are changing**” In the OECD countries, there have been massive changes concerning families. The decline in fertility rates has noticed, and this is accompanied by low fertility rates when compared to the replacement rates in the OECD countries. An increase in childlessness is also noticed, and a direct relationship can be established between the increase in education of women. Low fertility rates have led to reduced household size, and increasing divorce rates can also be observed in these countries. Cohabitation is slowly replacing the traditional institution of marriage, and cohabitation has led to more children living with a single parent. Women are getting educated, and there is an increase in their value in the modern-day labour day market. Though there is an increase in the value of women in the labour market, gender gaps are still persistent. Women tend to have part-time work, and usually, the higher positions are marked unavailable to the women. We can also observe a trend which leads to an increase in the average income of the households across the OECD countries. Some aspects that can be studied concerning children include an increase in child poverty, more children are getting to be educated or getting employed, and there is a relative stagnation concerning the child health sector. New policies are being designed to tackle the problems that modern families face is the need of the hour.

(Glaser, Stuchbury, 2014) has stated that in his study “**Changing family structures and their impact on the care of older people**,” The family structures in the United Kingdom are changing considerably. Some of the factors that are responsible for changing the family structures and influencing the formal and informal structures are discussed below. Partners and their adult children usually provide the informal care of the old age people. The changing family structures have led to an increase in marital disruption and complicated family relationships. This has led to a decrease in the availability of care to the old age people in the United Kingdom. An increase in the divorce rates of the people over the age of 60s has led the elderly to be alone, and this has led

them to be delicate and fragile, but this scenario is not always found to be true. The factors that tend to introduce a change in the families usually are antagonistic and work over one another. PSSRU models highlight that the demand for unpaid care tends to exceed the supply. These questions pose an essential question. The question is as follows: what is the way for old age people to be taken care of well concerning the drastic changes that have been brought about in the institution of the family.

(Lalan, 2014) has observed that in his study “**A sociological study of Old persons residing in an Old age Home of Delhi, India,**” The condition of elders has changed with the advent of the rapid growth of industries and modernization in India. Family members of the elders have started to hate them and also force them to move out of their own homes. The advent of the Nuclear family has not only affected the elderly but has also taken away the emotional support that the elders received from their family members. The question that arises now is whether old age homes provide the elders with the facilities that they require, and why do the elders go to old age homes? Data has shown that there are more women than men who are in old age homes because these women have performed household work all along, and they had no financial backup, and some were thrown out of the house once they became a widow. The elders prefer emotional support, and this is where the government needs to do an intervention to help the old age people. They can create an umbrella of social welfare programmes to help the elders. Also, the focus should be paid towards the abuse of the elderly. We should look forward to a world in which ageing is considered to be reasonable and something that is accepted. This would lead to a reduction in the negative stereotypes that have been attached to older people. Elders should be allowed to be a part of the social, economic, and cultural understanding of our day to day lives.

(Gupta et al., 2014) has reported that in his study “**Assessment of Facilities Available in Old Age Homes of Lucknow, India,**” The Old Age homes in India need to come under specific regulations, and a specific benchmark has to be set for the old age people to lead a life with dignity. In most of the cases, the old age people do not have the necessary financial aid to cope up with their medical and other expenses. A study about the quality of the life of elders in Public and Private Old Age homes was done. Generally, facilities such as medical services, recreational activity, safety space availability, and staff availability in the private Old Age Home was better than the Public Old age homes. On comparing the quality of life of the elders in homes, the ones in the Public Old Age homes had a below-average quality of life, whereas most of the people in a Private Old Age home had an average of an above-average quality of life. The Public Old Age homes usually had no caretaking person at home, and the Private Old age homes mostly had a caretaker at home. Overall, the Private Old age homes were found to be better as they had most of the facilities and the old aged people led a quality life. The government should think about sponsoring or undergoing a Public-Private Partnership to build at least one Old Age Home for the elders in every district.

(Rajendra Prasad, 2017) has observed that through his study “**Problems of senior citizens in India,**” Old age people are considered to be the most respected members of Indian society, but in practical terms, this is not the scenario. There seems to be a convinced stigma that is associated with the process of ageing, and that has not created anything beneficial to the country as a whole. The process where the government introduces plans and then acts to protect the elderly is not the solution to the problems that they face. What is required to change the conditions of the elderly in India is the question that runs through our minds. We should look forward to ageing as a phase where we should enjoy every single minute that we have and not as a phase where we bound to fall sick and should be in the care of someone. The solution to the various problems that the senior citizens in India face is not due to the laws or the provisions that the government has provided them, but with the mentality of the people themselves. If the senior citizens are treated with respect and dignity, the problems that they face will vanish away.

(Aparajita Chowdhury and Manoj Manjari Patnaik, 2013) Observes that in her study “**Understanding Indian Family Life: The Gender Perspectives,**” gender is one of the most important criteria that is often forgotten when we conduct any study. Without the aspect of gender in a particular study, the study is often incomplete. The role of gender in the family aspects has never been discussed before, and this is what is covered in this particular paper. Urbanization, industrialization, and modernization have brought about a change in the stereotypes, concepts of masculinity, kinship relationships, and so on. In the present scenario, we need to talk about the negative ramifications that have been brought about around the topic of gender and try to break them. This article emphasizes the importance of an intersectional study. A study that is not intersectional is not going to be beneficial, and it would lack in many aspects. The question that is raised right now is how will the negative pigeonholes that have been constructed be broken down and how come studies with emphasis on gender on families will be established in modern India.

(Singh et al., 2014) has observed that in their study “**Perception of old age and self: A comparative study of elderly females living in community and old age home,**” the Ageing is a natural and a biological process. We, as humans, have no control over it, and it has been happening and will be happening over a long period. There has been a negative perception of aging in the past few generations, and this particular article discusses how accepting people are of the ageing process. Old age women who live in a community are often

well accepting of the process of ageing, and they are capable of handling themselves when they are a part of the family whereas the women in the old age homes have a negative idea of the process of ageing and they are often critical of what ageing has brought to them. They are unable to handle themselves, and they often blame the process of ageing that has led them to the old age home. We are facing this issue to create a safe and sustainable model for the old age people to live and to be safe. The question raised to the policymakers is, how will this model inclusive of all the old age people be brought about?.

(Dhananjay Bansod and Balram Paswan, 2006) has insisted that in their study **“From Home to Old Age Home: A Situational Appraisal of Elderly in Old Age Home in Maharashtra,”** The model of families has been changing with the period. With a wide variety of outside influences, the families have become nuclear over the preferred joint types of families. On a study in the old age homes in Maharashtra, it has found that most of the old age people who were a part of the old age homes were from a rural background and those who were economically dependent. Abuse of the elderly was also a common occurrence, and this had a mental impact on the elderly. The lack of emotional support has had a significant impact on the elderly population. Though the elderly were happy at the old age homes as they provided them good food and functional clothing and took care of them well, more than 60 percent of the elderly were emotionally upset because of the tormenting actions they had to face back at home. The transition from home to old age home is not like someone shifting houses. It is about a population that has had vast amounts of experience and who requires care and emotional support. We should be focused on addressing the issue of how to make the transition of elderly from their homes to old age homes smoothly and also try to provide the elderly with the much-needed emotional support that they seek in their old age.

(Dixit et al., 2015) has asserted that in his study **“Old age Homes: Reasons For Admission and Assessment of Health-related Quality of Life of Inmates,”** The values associated with the traditional Indian family have been slowly vanishing, and this had led to drastic changes in the family patterns across India. A stereotype against the process of ageing is also brought in India, and this is deeply rooted in the present Indian society. This has led to the classification of the elderly as useless and has no role to play in the future Indian society. This has led the elderly population to be lonely, neglected, pushed away from their own homes, and also to get hurls of abuse that they face back at home. Due to the worse atmosphere that the old face back at home, most of them prefer to live in an old age home. Most of the elderly experienced moderate physical and mental pain, which interfered with their social activities to a certain extent. The government should improve the facilities available to the elderly in old age homes and also formulating policies and programmes for the elderly requiring welfare policies so older people are given the right to live in dignity-free of abuse and exploitation is the need of the hour.

(Bhoje, 2016) has observed that in his study **“The Changing Trends in Family Structure,”** The way the concept of family has been discussed in the past few decades has undergone tremendous changes. The joint families that the past had had almost vanished and this has given rise to the modern-day nuclear families. This necessarily does not mean that the institution of the family is getting destroyed. It means that the institution is transforming to meet the demands of the modern-day. Families all over the world look forward to caring, support, and affection to the family members only. We can also look at how the various aspects that make a family have also been changing with the likes of marriage, gender orientation, cohabitation. It has led to rising to families who are practicing single-parenthood, cohabitation, and LGBT families. Due to the change that has been brought about in the aspect of family, the behavior and functions of the individuals who form a part of the family has also changed with the advent of time. We should not be critical of the present way of interpreting the family and instead try to accept the concepts of family that have been brought about in the present generation and be supportive and understanding of how the definition emerged.

(Chadda & Deb, 2013) has reports in his study **“Indian family systems, collectivistic society and psychotherapy”** that India has always been collectivistic and enhances interdependence. With the present world where we have had industrialization and modernization, we have seen a huge shift in the families with the rise of nuclear families and the disintegration of joint families. Statistics have shown that India has a meager amount of mental health professionals, and mental health issues can be dealt with effectively if the families were involved as a part of the treatment. Indian families are capable of dealing and providing the members emotional and physical balance, and this is a valuable part of Indian society. This can be used by mental health professionals to a greater extent so that it is beneficial. The involvement of the family in an intervention has seen significant success rates over a short period. However, this is not the case in India, and this is quite depressing. A good model of family therapy, lack of integration of psychotherapy also has had detrimental effects on the mental health issues of individuals in India. Family therapy for the family members is also required so that they will be able to cope up with the changes that have been brought about in the institution of family in the last few decades.

(Dr Humaira Showkat, 2016) has defined in his study “**Need of Old Age Homes: A Sociological Study in Srinagar District**” that the institution of family that is considered to be the backbone of the social structures all over the world, has undergone tremendous changes. In Kashmir, the family was valued higher than every individual who constituted it, and it was considered to be the emotional, physical, and mental support at times when someone needed it. However, due to the advents of modernization, industrialization, these Kashmiri families have also undergone numerous changes. Due to the fall in the traditional values, the elderly feel more comfortable in an old age home, and they prefer to live there with dignity and care. The need for old age home is more seen in the upper-income group than middle- and low-income groups. The elders of the upper-income group feel that their respect and dignity etc. will be secured in such a place. Old age homes are a necessity in the present-day scenario also because the younger generation does not have the time or, in many cases, the resources to meet their needs. Nevertheless, old age homes should be considered only as a secondary option and not as a first option. The elder should never be made to be felt like they are a burden and aren’t required in the modern world. They should be respected and they should be given the dignity that they deserve and they should also be understood and their experiences should be valued and passed on to the future generations.

(Kapur, 2018) observes through his study “**Problems of the Aged People in India The Fundamental Nature of Human Resource Management View project Teacher Education in India View project Problems of the Aged People in India**” that the aged people in India experience various problems which include social problems as they are not preparing for the old age; economic problems like exploitation, unable to meet the rising costs with limited savings especially in marginal sections of the society; Psychological effects like loneliness, isolation, powerlessness, depression, and meaninglessness; Health problems mainly due to environmental and biological conditions, economic conditions also affect the health situation; Crimes against them; Abuse of them like psychological, sexual, physical abuse (Scapegoating is essential to abuse here); Measures to be taken are drug and social support, the role of religion, counseling, safe housing, Generation of awareness and finally resilience. There are also different problems like intergenerational problems, which are equally important to counter. The role of Social workers is essential and they should work through the workspace. Necessary measures to be taken are improving social and economic welfare, health conditions, Participation in activities and functions, providing them with education, and implementing the national policies for their benefit. The role of NGOs is equally essential in this situation.

(Menezes & Thomas, 2018) emphasizes that in their study “**Status of the Elderly and Emergence of Old Age Homes in India,**” The emergence of old age homes is mainly due to an increase in nuclear families. Successful ageing as multidimensional, which encompasses physical, psychological, functional, and social health. There is a similar procedure around the world to identify old age in India according to the Maintenance and Welfare of Parents, and Senior Citizens Act, 2007 – old age has reached when an individual crosses 60 years. They experience loneliness and, at the same time-independent.

In many cases, social support is also absent and has to accept the “New Home.” Elder security and their wellbeing are essential. There has to be awareness among the elderly people about being emotionally vibrant, which is reducing stress, copying the lives of others, etc. particular emphasis should be laid on Psychological capital (Psy Cap) which focusses on positive mental power, successful ageing. It helps in building renewed confidence.

(Ms Isha, 2014) she observes that in his study “**Quality of Life in Old Age Homes in Punjab: A Study of Institutionalized Elderly,**” that the society has the task of improving the quality of life of institutionalized elderly. UN estimates the doubling of the population of elders aged 65 by 2050 which is now at 7.6%, and similar change can be observed in India, which stands currently at 8.2%. Old age homes are becoming their final choice either voluntarily or involuntarily. They are state-run, private, and the one run by NGOs. Reasons to move are demographic, economic, familial/social, and psychological/personal. The availability of provisions and services is high in non-govt old age homes when compared to Govt ones. They are satisfied with the services provided and interested to be in alternative homes rather than with their children.

(Mahajan, 2013) has points that in his study “**The Indian Elder: Factors Affecting Geriatric Care in India,**” The number of elderly people in India increased by 54.77 % in the last 15 years, the first demographic change due to low fertility rate and increasing life expectancy. Geriatric care difference between rural and urban. The social backbone has broken with an increase in changes in family structure. Female working also affecting the system in taking care of elders. Elders with daughter face severe problems as they cannot stay with them in India. Social and psychological factors play an essential role in keeping Indian elders healthy. Elder suicides are widely underreported. Gerontology studies were not enough for the population. Proper health research was absent. India owns 21% of the global burden of religions. The per capita, public expenditure on health was 45\$, which is very low. Indian gerontological institutes should be used appropriately to implement the policies and promote awareness. Suggestions to improve the conditions of old elders are linking the services with the primary health system as they are present widely. 2012 world health day’s dedicated theme is the health care of the elderly.

(Akbar et al., 2014) has describes from their study “**Reasons for Living of Elderly to In Old Age Homes: An Exploratory Study**” that the population of elderly aged 60 has tripled in the last 50 years. Earlier older people received a higher position in the traditional family system. Mis-behavior from son and daughters-in-law is the majority problem, and the second significant problem is poverty/no financial support. A parent living married daughter will not get moksha was widely believed in India. The elderly chose Old age homes rather than living with families. An increase in nuclear families is widely considered as the main reason for starting of old age homes.

(Veda, 2017) has reveals that in his study “**Structure, Types, and Functions of Old Age Homes in Karnataka,**” that the old age homes are available to rural people only in Gujarat, and in other states, it is very minimal. Ministry of social justice and empowerment has started constructing OAHs but mostly run by NGOs. Learning of old age people should be prioritized in their developmental activities. Free homes mainly have people who are destitute, childless, etc. whereas paid and stay has people who want to escape the abuse from their children. The social involvement of people living in OAH is low. Four main components of the organization are inputs, transformational processes, outputs, feedback. The first nursing home institution in India established in 1782. Little sisters of Calcutta were a vital institution that started working for old. Should be registered under the Department of Welfare and Population Development. The government provided Grand-in-Aid for running old age homes. Integrate program for old age persons 1992, made many changes to benefit the elderly. Maintenance and Welfare of Parents and Senior Citizens Act, 2007 states that at least 1 OAH per 150 persons. Aged persons act in 1967 controls the working of Old age homes.

(Yeung et al., 2018)reveals that in his study “**Families in Southeast and South Asia,**” Family the system was affected by economic development, educational and human development, cultural factors, and finally, by pubic policies. Modernization theory argues the decrease in large rural families. Developmental idealism argues that the ideology of developed societies has observed that the second demographic transition emphasis individual freedom of choice. Colonial power influenced the family system in SEA and SA. Family system is affected by the intersection of culture, industrialization, public policies, change in the educational system, and globalization. Socio-economic context and transformation which happened in SEA and SA are Economic growth and rise in education, gender inequalities, and labour market opportunities for women. Major trends or changes are fertility decline (Education and role of family planning programs), early childbearing and childlessness, missing girls, changes in marriage patterns, and others. The family system is still rigid as getting assistance from young adults, the presence of extended families, and others, but the emergence of changes in the family system can be found. SEA and SA are different from East Asia, so the complete Asian family system is absent due to irregularities. The changes in the family system are due to the three reasons, and they are moving away from agriculture, rapid modernization, and rapid ideational changes, and finally, religious, regional, and cultural diversity, which leads to an aspirational revolution.

(Khanal, 2018)

(Khanal, 2018) has reports that in his study “**Children’s Migration and Its Effect on Elderly People: A Study at Old Age Homes in Kathmandu,**” that the migration of children for employment is the leading cause of elderly living in old age homes. Old age homes are a new culture in Nepal. Many face risks stemming from the loss of personal support and care. Emotional problems like loneliness are the majority problem. As government policies regarding this absence, it is causing trouble for older people. International migration is increasing, and the majority concept is employment. A similar study conducted in China; the results are the same.

(Amiri, 2018)has asserted that in his study “**Problems Faced by Old Age People,**” is that the emerging of nuclear families creating old people psychological, physical, and financial insecurity. The majority of old age people are facing economic problems. The majority are facing a generational gap conflict. Stressing mainly on the role of the social worker in solving the problems of older people. Focused on effective implementation for National Policy for Health Care of Elderly (NPHCE).

(P. Kumar et al., 2012)notes that in his study “**Mental and Physical Morbidity in Old age Homes of Lucknow, India Mental and Physical Morbidity in Oldage Homes of Lucknow, India**” that depression was shared on the older people who are living in the old age homes. Declining government budget for health is also one of the reasons for high health issues in old age people. The southern part of India has accounted for 52% of old age homes. Geriatric medical problems are not recognized widely among professionals. Mostly females are joined in the old age homes as they are mostly financially dependent.

(Vanitha D, 2014)noted that in his study “**Institutional Care of the Elderly: A Study of Old Age Homes in Hassan City, Karnataka, India**” that the institutional care provided to the old aged population, taking a case study of the Hassan city in the state of Karnataka. Ageing is an essential socio-psychological problem in every family in Indian society. Their needs and wants become more sophisticated with the increase in their age. It is trying to provide a study about the problems that the elderly commonly face during their stay in

the so-called “home away from home.” They face problems adjusting with their fellow inmates, various physical and mental disorders they face. Depression is one of the main problems the elders face during their old age. This can make them show a lack of interest in their day to day activities, which they used to do. They are more susceptible to a variety of physical disorders, which can adversely affect their mental health as well. Because of their illness, depression can hit them, and it is observed that most of them are said waiting for their impending death. Institutional care cater to all the needs of the people in the best possible way. They look after the proper dieting, encourages them to have proper and regular exercise, making them undergo a regular medical check-up, and to keep mental health, strong prayers and meditation are practiced. More than all these material aspects, they should be provided with the emotional needs of the old aged. We should make them feel secure because that is required more than medication. Social involvement of the elderly should be made more active. The situation in their own homes has driven these helpless people to these care homes and that situations should not be repeated in these safe havens.

(Pandurang Jeeragal et al., 2019)has portrayed through his study “**Epidemiological Study on Relationship of Socio-Demographic Factors and Determinants to Shift to the Old Age Home Among Elderly Women in Chittoor, District A.P**” that the due to the change in the traditional lifestyle and cultural values, mostly compel the elderly to OAH. The study was conducted with women who were willing to stay in OAH for more than a year and who have given written consent. The study consisted of two parts, Socio-demographic factors, and determinants, which compel them to shift. From the study, it is clear that older women of the nuclear family were in OAH than in joint families. Other leading causes are misbehavior of daughters-in-law and poverty and the over-dependence of the elderly. Most of the older women are between the ages of 60 to 69 years, it is because of socio-demographic factors such as a change in family structure and break down of joint family. Other than these, there are certain compelling factors such as low female literacy rate, gender discrimination, financial insecurity, unemployment of self and their children, and settlement of children abroad. Some of the recommendations to improve the lives of elderly women are increasing female literacy, abolishing gender discrimination, increasing old-age pension, covering every woman in the health insurance scheme, and government providing more attention to elderly women OAH and their welfare.

## II. CONCLUSION

Globalization has created many changes in everyday life of common men. The process is not only economical, but it also has a great deal in the cultural, social, and political forces of different countries. Families are the primary unit of society, and globalization has created much of a difference in the fundamental structure of society, and the study deals with the changing familial structure in the Gulbarga district of the state of Karnataka. Analysis has been done on change in the family structure and function in the present scenario. Due to globalisation, the structure of the family has changed from joint to nuclear. The paper also describes how different families in the villages are having changes in family roles and decision making. The study also portrays the tendency regarding the decrease in the mutual relation in the family. It also projects how many families choose new means of treatment, replacing traditional means of treatment. The study also shows the changes in the economic structure of the family as well. Education is being more preferred in private schools, and convent schools than government schools and education have now become a necessity in everyone’s life. The society is in its transitional phase as nurglobalisation has touched its most basic unit, families.

## References

- [1]. Akbar, S., Tiwari, S. C., Kumar Tripathi, R., Kumar, A., & Pandey, N. M. (2014). Reasons for Living of Elderly to In Old Age Homes: An Exploratory Study. *The International Journal of Indian Psychology*, Volume 2,(Issue 1.). <http://www.ijip.in>
- [2]. Amiri, M. (2018). Problems Faced by Old Age People. Article in *The International Journal of Indian Psychology*. <https://doi.org/10.25215/0603.026>
- [3]. Aparajita Chowdhury and Manoj Manjari Patnaik. (2013). understanding indian family life: the gender perspectives. In *EXCEL International Journal of Multidisciplinary Management Studies* (Vol. 3, Issue 7).
- [4]. Bhoje, G. (2016). The Changing Trends in Family Structure. In *International Journal of Research in Economics and Social Sciences* (Vol. 6, Issue 2). <http://www.euroasiapub.org>
- [5]. Chadda, R. K., & Deb, K. S. (2013). Indian family systems, collectivistic society and psychotherapy. In *Indian Journal of Psychiatry* (Vol. 55, Issue SPEC. SUPPL.). <https://doi.org/10.4103/0019-5545.105555>
- [6]. Dhananjay Bansod and Balram Paswan. (2006). From Home to Old Age Home.
- [7]. Dixit, S., Bansal, S., Banzal, S., Saleem Raja, R., Dua, S., & Agrawal, R. (2015). Old age Homes: Reasons For Admission and Assessment of Health-related Quality of Life of Inmates. In *National Journal of Community Medicine | Volume* (Vol. 6). [www.njcmindia.org](http://www.njcmindia.org)
- [8]. Doddamani, K. N. (2014). A Sociological Study on Changing Family Structure in Karnataka. In *IOSR Journal Of Humanities And Social Science (IOSR-JHSS)* (Vol. 19, Issue 6). Ver. V. [www.iosrjournals.org](http://www.iosrjournals.org)

- [9]. Dommaraju, P. (2016). Perspectives on Old Age in India. In *Contemporary Demographic Transformations in China, India and Indonesia* (pp. 293–308). Springer International Publishing. [https://doi.org/10.1007/978-3-319-24783-0\\_19](https://doi.org/10.1007/978-3-319-24783-0_19)
- [10]. Dr Humaira Showkat. (2016). Need of Old Age Homes: A Sociological Study in Srinagar District (JK). *International Journal of Research in Sociology and Anthropology*, 2(2). <https://doi.org/10.20431/2454-8677.0202002>
- [11]. Glaser, Stuchbury, T. and A. (2014). Changing family structures and their impact on the care of older people.
- [12]. Gupta, A., Mohan, U., Tiwari, S. C., Singh, S. K., Singh, V. K., & Quality, S. V. (2014). Assessment of Facilities Available in Old Age Homes of Lucknow, India. *Article in National Journal of Community Medicine*, 5(1), 21–24. <https://doi.org/10.13140/2.1.1289.2807>
- [13]. Jiloha, R. C. (2009). Impact of Modernization on Family and Mental Health in South Asia. In *Review Article Delhi Psychiatry Journal* (Vol. 12, Issue 1).
- [14]. Kapur, R. (2018). Problems of the Aged People in India The Fundamental Nature of Human Resource Management View project Teacher Education in India View project Problems of the Aged People in India. <https://www.researchgate.net/publication/325144978>
- [15]. Khanal, P. (2018). Children’s Migration and Its Effect on Elderly People: A Study at Old Age Homes in Kathmandu. In *American Journal of Gerontology and Geriatrics* (Vol. 1, Issue 1).
- [16]. Kumar, A. (2011). The Changing Face of Family & Its Implications On The Mental Health Profession in Delhi. In *DELHI PSYCHIATRY JOURNAL* (Vol. 14, Issue 1).
- [17]. Kumar, P., Das, A., & Rautela, U. (2012). Mental and Physical Morbidity in Old age Homes of Lucknow, India Mental and Physical Morbidity in Oldage Homes of Lucknow, India. *Delhi Psychiatry Journal*. <https://www.researchgate.net/publication/255949274>
- [18]. Kumar, Y., & Bhargava, A. (2014). Elder Abuse in Indian families: Problems and Preventive Actions. *International Journal of Scientific and Research Publications*, 4(10). [www.ijsrp.org](http://www.ijsrp.org)
- [19]. Lalan, Y. (2014). A sociological study of Old persons residing in an Old age Home of Delhi, India. In *International Research Journal of Social Sciences* (Vol. 3, Issue 4). [www.isca.me](http://www.isca.me)
- [20]. Mahajan, A. (2013). The Indian Elder: Factors Affecting Geriatric Care in India. *GLOBAL JOURNAL OF MEDICINE AND PUBLIC HEALTH*. <https://www.researchgate.net/publication/329276431>
- [21]. Menezes, S., & Thomas, T. M. (2018). Status of the Elderly and Emergence of Old Age Homes in India. *International Journal of Social Sciences and Management*, 5(1), 1–4. <https://doi.org/10.3126/ijssm.v5i1.18972>
- [22]. Mokashi, M. S., & Professor, A. (2016). A study of Factors Compelling Elderly to stay in old Age Home with special reference to Kundapur city old Age Homes.
- [23]. Ms Isha. (2014). Quality of Life in Old Age Homes in Punjab: A Study of Institutionalized Elderly. *Elk Asia Pacific Journal of Social Sciences*, 2(2). <https://doi.org/10.16962/EAPJSS/issn.2394-9392/2014>
- [24]. OECD. (2011). Doing Better for Families Families are changing. Case Study. <https://doi.org/10.1787/888932392457>
- [25]. Pandurang Jeeragyal, D., Amarnath Trivedi, R., John, K. R., & Somasekhar, M. C. (2019). Epidemiological Study on Relationship of Socio-Demographic Factors and Determinants to Shift to the Old Age Home Among Elderly Women in Chittoor, District A.P. *International Journal of Research & Review (Www.Ijrrjournal.Com)* Vol, 6(8). [www.ijrrjournal.com](http://www.ijrrjournal.com)
- [26]. Rajendra Prasad. (2017). Problems of senior citizens in India. [www.socialresearchjournals.com](http://www.socialresearchjournals.com)
- [27]. Singh, S., Subramanyam, A., Kamath, R., Pinto, C., Raut, N., & Shanker, S. (2014). Perception of old age and self: A comparative study of elderly females living in community and in old age home. *Journal of Geriatric Mental Health*, 1(1), 32. <https://doi.org/10.4103/2348-9995.141923>
- [28]. Sonawat, R. (2001). Understanding Families in India: A Reflection of Societal Changes (Vol. 17, Issue 2).
- [29]. Sooryamoorthy, R. (2012). The Indian Family: Needs for a Revisit. In *Source: Journal of Comparative Family Studies* (Vol. 43, Issue 1). [https://www.jstor.org/stable/41585377?seq=1&cid=pdf-reference#references\\_tab\\_contents](https://www.jstor.org/stable/41585377?seq=1&cid=pdf-reference#references_tab_contents)
- [30]. Vanitha D. (2014). Institutional Care of the Elderly: A Study of Old-age Homes in Hassan City, Karnataka, India. In *International Journal of Interdisciplinary and Multidisciplinary Studies (IJIMS)* (Vol. 1, Issue 5). <http://www.ijims.com>
- [31]. Veda, C. v. (2017). Structure, Types, and Functions of Old Age Homes in Karnataka (Vol. 5, Issue 2). <http://www.indiaspend.com/cover-story/as-india-aged-32-of-elderly-got-71-of>
- [32]. Yeung, W.-J. J., Desai, S., & Jones, G. W. (2018). Families in Southeast and South Asia. <https://doi.org/10.1146/annurev-soc-073117>