

CHAPTER SIX

SUMMARY AND CONCLUSION

6.1 MAJOR FINDINGS FROM SECONDARY DATA

Goan society graying faster than Indian society

The world is undergoing a major demographic change which is affecting society and economy. The process of ageing is universal though the rate of transition varies from one country to another. India in general and Goa in particular has become aging societies. The overall trend observed in Census reports from 1961 to 2001 reveals that Goan society is graying at a faster rate than that of the Indian society due to low birth and death rates and increase in longevity of life. Goa is the smallest State in India but has better health and development indices than most of other Indian States. Goa has made a tremendous achievement by reducing the birth rate from 31.99 per 1000 in 1961 to 14.3 in 2001. The birth rate has gone down to 14.3 per 1000 as against the all India figure of 23.8. Similarly the death rate has slipped to 7.2 per 1000 whereas the corresponding figure at the national level is 7.6 per 1000. This change is going to affect the social and economic lives of human beings to a great extent. Compared to other Indian States, Goa is much ahead in the process of demographic transition which implies that proportionally fewer young people in State will be available to take care of the older population.

Social transformations taking place in the Goan society.

Besides demographic transition, there are also transformations and changes that are taking place in the Goan society like nuclearisation of households, large-scale inter-state and international migration of Goan youth, husband and wife going out for work, individualistic attitudes etc. which can add to the problems of giving care and support to

the elderly population. Industrialization and modernization brought about radical changes in the institutional structure of the society which affected the mode of social adjustment of the aging.

Goan society versus the Theoretical models

Goa does not fall in any of the theoretical model mentioned in the study. Although Goa is one of the advanced State of India but the elderly still enjoys the respect which is due to them in the family and society at large. Goa has a western influence but it has not forgotten completely its social and cultural roots. Therefore, the concept of the modernization theory which says that the status of the elderly declines as societies become modern because of urbanization, social mobility and technological change is still not fully applicable to the Goan society.

In regard with the other two theories namely, the Disengagement and Activity theory, some of the older persons disengages themselves after retirement, while other elderly are still active and is involved in different activities after the age of 60. All these theories have been developed keeping the experiences of the western society. A single theory by itself cannot be applied to the situation of the elderly in Goa. It is the combination of all three theories that can be made applicable to the Goan society.

Although aging is negative for some people, for others it opens the door to meaningful new roles and activities. Our study reveals that an active type of life is more desirable than complete disengagement for a successful aging. Although the elderly due to retirement or physical weakness have to lead a disengaged life, but still they do not like to disengage themselves from family and society. Majority of them like to remain fully integrated in the social network and enjoy association and interaction with various

groups of people. Lack of activity and social interaction is neither desired nor enjoyed by them.

Reviewing studies on old age

The words – gerontology and geriatrics, were both coined in the first decade of the twentieth century, but neither field attracted much interest among scientific investigators. The first to stress the importance of special studies of disease in old age was the French physician Jean-Martin Charcot in 1881, but few from the medical and scientific community undertook those studies until the early 20th century, when it became apparent that with the increasing proportion of the people older than 60 in developed countries specialized physicians dedicated to treating the diseases associated with old age were needed. The goal of research in gerontology as it developed was to learn more about the ageing process – and not for the purpose of extending the life span but for the purpose of possibly minimizing the disabilities and handicaps of old age.

The research interest in aging in India is only a few decades old. It was in 1950s for the first time that a few articles on aging appeared in journals. The early doctoral thesis in psychosocial gerontology also appeared in the late 1960s and 1970s. The 1970s also saw a wider range of articles covering the fields of biology and the various social sciences.

The real focus on the ageing of the population and government's concern for the elderly as a priority issue began with India's participation in the World Assembly on Ageing at Vienna in 1982, where India along with other nations adopted the United Nations International Plan of Action on Ageing. International perspectives on ageing form an integral part of national planning for the welfare of older persons. The

Government in stressing its intention for the welfare of the elderly brought out a National Policy for Older Persons (NPOP) in January 1999. The goal of NPOP is to strengthen the legitimate place of older persons in society and help them to live their last years with purpose, dignity and peace.

The medical research in the area of aging in India is still in an embryonic stage. But the research output in the areas of behavioral and social sciences in India has outweighed that of the biological and medical research. But still there are not enough studies to cover all the dimensions of aging. The areas fairly well or moderately covered are problems of adjustment and coping, retirement, life satisfaction, the elderly in the family, social supports, attitudes, intergenerational interactions, impact of demographic changes, quality of life, widowhood problems etc.

While reviewing studies on old age it was found that there is lack of comprehensive gerontological literature in India. And when you think about the studies done on the elderly in Goa, it is almost non-existent. Hence this study apart from adding to the knowledge in gerontological literature will provide valuable information that may help in the proper functioning of the Government and social service organizations in the interest of the aged people.

Institutionalized Care in Goa gained roots under the rule of Portuguese

Joint families were the common feature of the Goan society like in other parts of India where both the younger and the older generations lived in harmony forming a symbiotic relationship. The patriarchal authority over the family members and its affairs was virtually absolute. Tradition demanded total obedience and disobedience to elders was

considered one of the gravest offences in those days. Hence the aged were respected and cared. The feeling of getting institutionalized care for the elderly was not felt.

The institutionalized care of the elderly started after the arrival of Portuguese in Goa in the year 1510 although there existed a charitable institution in 1053 A.D by name “MIJIGULI” in the old city of Gopakapura that is now known as Goa-Velha to supply food to the poor and the helpless and to provide lodgings for the pilgrims. Therefore, one can confidently say that the institutionalized care for the elderly gained roots under colonial rule because of the historical situation in Goa wherein there was a need to help the aged, disabled including the widows and daughters of the dead soldiers.

In the post-liberation period the Non-Government Organisations which are sensitive to the elderly issue responded to this situation by establishing many Homes for the Aged and Day Care Centers in Goa. While this may be a continuation of a Portuguese tradition of institutionalized geriatric care, in the post-liberation phase it can be seen as a pointer to the gradual declining family support system.

Welfare Measures adopted by the State and other Voluntary Organizations for the elderly in Goa needs to be strengthened.

The framers of the Constitution had vision and concern for the aged people in our country. They wanted the government to take care of them and to treat with all respects. Hence, they have included a separate Article 41 in the Constitution which pledges to provide assistance to the aged. In view of this, the researcher took into account three types of conscious efforts taken at enabling the elderly to live a better life namely, the

State Government, the Interventionist, and the Voluntaristic. The Government of Goa initiated a number of welfare schemes like old age pension, old age homes, day care centers and special facilities for medical and health care as well as concessions for travel for the welfare of the elderly. It was observed that with launching of old age pension, medi-claim scheme etc. the beneficiaries' life became comfortable. No longer were they considered a financial burden for the family and old age home.

Since some welfare measures like DSSS need MLA's signature on the application form, one lives the scope for political manipulation which could be avoided if there is intention to help the elderly.

It is also observed that some of the current welfare schemes for the elderly have a character of a 'destitution allowance' which turns the elderly into relatives of society. This kind of tag does not give a sense of dignity to the elders in the society. The whole attitude towards these schemes should be given a different outlook where elderly are taken as respectable members of the society.

Free medical facilities are also provided through Government hospitals to the elderly, but the accessibility to these hospitals from far away villages especially for the elderly persons becomes a problem. The Government should plan to extend these kinds of services like ECG monitoring, diabetic clinics etc. to Primary Health Centers, since these primary health centers are the backbone of public health care. Hence Primary Health Centers need to be strengthened and oriented to be able to meet the health care needs of elderly.

The NGO's who were sensitive to the elderly issue responded to this situation by establishing old age homes, 108 emergency services, day care centers etc. Moreover, the

senior citizens themselves gathered together and formed senior citizens forums in various villages to assist senior citizens who are in dire need of support. Hence, it was recognized that the aged as a social category needs specialized attention. However, more efforts are required to be done in this direction so that the concerns of the elderly become the concerns of the State. Hence, both the Government and the voluntary sector should work in collaboration with each other and try to make Goan society friendlier for its senior citizens.

6.2 MAJOR FINDINGS FROM PRIMARY DATA

Socio-economic characteristics among the elderly residing in their families and old age homes – Reveals differences.

The profile of the selected respondents who are residing with their families and at old age homes reveals differences in terms of sex and age group, educational background, marital status, spouses alive, number of children and occupational structure. While the elderly who are residing at home indicates more male elderly, age group is of young old, higher educational level, higher marital status, more spouses alive, having children and higher income level because of the occupational status as compared to the elderly who are staying at old age homes.

Women make up a relatively large proportion of seniors. It further points out that the share of the senior population accounted for by women is even higher in the older age groups. Thus, it points out to the possibility that women have a considerably longer life expectancy than men in Goa. Higher age groups tend to join old age homes because here

basic necessities of life and health care are taken care of. Hence institutions like old age homes should be provided and made accessible for those who may need them.

Education, pension and past income and asset ownership not only gives status and empowerment to the elderly but also helps them to receive caring attitude from the family members and at old age home too.

Financially well off aged persons enjoys satisfactory relationship

The study reveals that those elderly having a higher socio-economic status indicates towards the fact that financially well off aged people are more likely to get proper care, respect and position of authority in the family than the others. Their relationship with the family members living with them as well as with the children living separately remains satisfactory.

Problem of Widowed – a concern

A concern is felt because of the problem of widowed. It was observed that the percentage of widowed females is higher than that of widowed males of the same age group because it is customary for women to get married to men older by several years; also do not remarry and live longer. Likewise a smaller proportion of men are widowed compared to women in higher age groups. Widowed status makes the person vulnerable and especially when they belong to higher age groups, since it makes the aged dependent or insecure in their lives. The study also reveals that majority of those who preferred to join old age home are either widowed or unmarried, since they did not have anybody to take care of them or were unable to maintain themselves.

Family's ties still strong

Majority of the elderly who are staying with their families at home do not feel lonely. It is because they are not alone at home. Majority of them are living with their spouse and children. There are other elderly whose children are not staying with them, but still maintained their intimacy from a distance by different means of communication and supported them in times of need. Although Goa is considered as one of the advanced states in India, but still this human element has remained. Even most of the payment done for the inmates staying in old age home is done by their children thus displaying their love towards them. All these shows that family ties are not dead but has changed in quality. The respect and care for elders is not withering away but changing its face and form. The old definition of a family as a group of people living under the same roof, eating at the same hearth, and related to each other by blood or law has changed, but the basic qualities of relationships expressed through caring each other and sharing has remained. People sometimes are living and eating separately, but they feel still that they belong to one family, that's why the family as a system has sustained.

Life in old age home - satisfying

The elderly who are staying in old age home felt satisfied because of the various facilities available to them in the aged homes. There is time for everything. There is time for food, time for prayer, time for entertainment, and for personal work. Moreover, they get their medicines on time. Although they felt satisfied physically but they still felt that they are missing something; since they opted for old age home because of acute necessity. Moreover, they have to rebuild relationships with fellow inmates' in order to make their life happy.

Elderly contributes.

The study recognizes that older persons are a resource. The elderly who are residing at home are contributing for the expenses in running the household. They render useful services in the family and outside. This in return helps them to receive more caring attitude from others in the family. The elderly who are residing at old age home also pay for their stay at aged home. More over, those who are physically capable do a wide variety of household chores. Working women find it useful when elderly living with them share household responsibilities. There is thus a two way transfer of supportive roles which helps them to integrate in the family functionally and emotionally. This shows that the elderly are not just consumers of goods and services but also their producers.

Involvement in the community is less in comparison with their family

Although majority of the elderly are involved in their family affairs but for many their involvement in social, religious and political sphere is less. Comparatively, the elderly are more inclined to get themselves involved in religious and social activity rather than in political activity. The reason is religious and social activities provides a sort of social support in the form of personal contact with other people at religious and social gatherings with whom they could share their thoughts. is social and religious participation that life of the old revolves. Nevertheless there are some who are actively involved in the community.

Leisure time.

Life satisfaction is strongly related to satisfaction in leisure activities. The elderly who are staying at home with their families spend more time in leisure like watching TV,

reading, praying, gardening, exercises etc. than of inmates residing at old age home. This is because in old age homes there is a fixed timetable which is to be followed.

Advice sought and respected from the Elderly before taking decisions

It was observed that their family members sought advice from the elderly in domestic matters at home like buying and selling of properties, marriages in family, on education of children, on buying durable goods etc. Moreover, their opinions too are respected by their family. Thus it reveals that the elderly still has a place of honour and respect in their respective families.

Children as main supporters

Today in spite of modernization, technological change, mobility and the exposition in lateral transmission of Knowledge, the elderly still have accepted the fact that children are the main supporters of elderly in their old age. They believe that their children have the obligation to love reverence and show gratitude. Hence, the best place to live at their old age will be with their families.

Conclusion

It may be summarized from the above analysis and discussion that Goan society is graying at a faster rate than the Indian society. The study attempted to provide an understanding of the implications of demographic transition and societal transformation for the category of elderly in Goa. The family as a single unit is likely to change. It will require a great deal of adjustment at the family level to accommodate and care for the elderly. Elderly should never be treated only as a liability or as a burden on the family and State. Society must consciously inculcate the values of integration between

generations. Active aging for elderly has to be promoted. Their learning, experience and maturity have to be put to use.

. Goa does not fall in any of the theoretical model mentioned in this study. Although Goa is one of the advanced States among other States in India, but still the respect for the elderly is present in their respective families and in the community as a whole. Some are still active and continue to give services at home and in the society at large. Many disengage themselves after retirement.

Old age homes could be utilized more as supplements rather than easily available alternative care arrangements. The western model of care provides useful ideas in the care of the elderly like home help services, respite care, volunteer services, infirmary care and hospice care. Such services help the family to overcome the crisis situations of elder care at home. At the same time, family care needs to be strengthened with incentives like tax remission, medical and food subsidies for the elderly and other supplementary attractions to encourage family care. Yet, we need old age homes for those who need them and for those who do not want to live with their children.

The Goa Government and other voluntary sectors have begun to recognize the aged as a social category who needs specialized attention. Hence, the Government and NGO's has initiated many welfare measures so that the elderly in Goa spend rest of their life with dignity and peace and free from any kind of anxiety during the rest of their life. However, more efforts are required to be done in this direction so that the concerns of the elderly become the concerns of the State. There is scope for greater progress which is possible through the public-private partnership model.

To conclude, taking care of the aged should come in a natural way. Both the old and the young should understand the issues and problems. Hence, as long as one lives, he or she has the right to live with respect and dignity. Younger generation should always think of the love, affection and guidance given by their parents. The first step of life is always guided by the parents. Hence, it is expected that the children would extend their hands for the last step of their parents.

6.3 POLICY RECOMMENDATIONS

Financial Security

A great anxiety in old age relates to financial insecurity. For elderly persons working in an unorganized sector or in household itself, old age pension provides some succor. The attempt of the Government of Goa to provide financial assistance under Dayanand Social Service Scheme (DSSS) to the needy senior citizens of the State working in unorganized sector is well appreciated across the society. It has provided a safety net for such people. But it has to be revised at intervals so that inflation does not deflate its real purchasing power after certain years. In no case, it should be less than the lowest minimum wages fixed for a serving employee.

The MLA's signature on the application form leaves scope for political manipulation. This could be avoided if there is intention to help the elderly. Further, the findings show that this DSSS scheme has a character of 'destitution allowance' which turns the elderly into dependents on society. This kind of tag does not give a sense of dignity to the elders in the society. The whole attitude should be given a different outlook where elderly are taken as respectable members of the society.

Health Service

With advancing age, old persons have to cope with health and associated problems. Hence, health care services need to be given top priority. Free medical facilities are provided through Government hospitals to the elderly, but the accessibility to these hospitals from far away villages especially for the elderly persons becomes a problem. The Government of Goa should plan to extend these kinds of services like ECG monitoring, diabetic clinics etc to Primary Health Centers, since the primary health care system is the basic structure of public health care. This study recommends mobile health care facilities. In this way the health facilities for the elderly will be available in every village. The primary health care workers should be trained in health cares of the elderly as well as counseling.

Facilities for specialization in geriatric medicine should be provided in the Goa Medical College. Training in Nursing Colleges in Goa should include geriatric care. Difficulties in reaching a public health care facility should be addressed through mobile health services or ambulance services. Geriatric wards and Geriatric OPDs like pediatrics for children should be established in Goa Medical College and District hospitals to begin with, and then progressively extended to UHCs and PHCs.

Mediclaim Scheme provides financial assistance for availing super specialties which are not available under the State Government Hospitals. Because of this scheme, thousands of lives are saved every year but many could not avail of it because of too much of paper work. The Directorate of Health Services could bring certain changes to simplify the procedure, so that more could be benefitted.

The concept of healthy ageing is to be promoted by the Directorate of Health Services. It is necessary to educate the elderly and their families that diseases are not a corollary of advancing age nor is a particular chronological age the starting point for decline in health status. On the contrary, preventive health care can keep a person reasonably in good health and prevent disability.

The western model of care provides useful ideas in the care of the elderly like home help services, volunteer services etc. Such services help family to overcome the crisis situations of elder care at home.

Institutionalized Care

Besides demographic transition, there are also transformations and changes that have taken place in the Goan society like nuclearisation of households, large-scale inter-state and international migration of Goan youth and husband and wife going out for work etc. These changes make it difficult to take care and give support to the elderly population staying in the families. Hence, the Government of Goa and NGO's who are sensitive responded to this situation by establishing Old Age Homes. The findings reveal that both sectors are running in parallel direction. The scheme 'Sanjeevani' which started by the Goa Government to provide financial support to organizations that run homes for senior citizens has not been availed by these organisations. The scheme has remained unused. Therefore, the clauses in the scheme which makes it difficult to implement the scheme could be sorted out by the Government and the voluntary sector and work in collaboration with each other. Through Old Age Homes we can make Goan society friendlier for its senior citizens especially to the single elderly who need institutionalized

care, since they do not have anybody to take care of them or are unable to maintain themselves.

Support System for the family

Family is the most cherished social institution in Goa and the most vital non-formal social security for the old. For the elderly it is the most preferred living arrangement and also the most emotionally satisfying. The findings reveal that the children still respect their elderly and many continue to live with their family. To ensure that the elderly can continue to live with their family, a support system for the family needs to be established to assist families in caring for the elderly. Certain incentives like tax remission needed to be introduced to enable family members to continue caring for their family members in their old age. Presently, the senior citizen card issued by the Social Welfare Department allows concession on travel and medical facility only. The card holder should also be entitled to avail benefits of shops, service centres and products exclusively meant for senior citizens.

Employment

The findings reveal that 59% of the elderly living with the families lives on their own income. Moreover, they contribute towards the expenses of the house. This in turn creates a congenial environment and helps them to receive a more caring attitude from others in the family. Major changes in the structure of the economy are making elderly's role redundant and the early retirement age makes it impossible for many to work even when their roles are not redundant or capable of working for more years. Accordingly, the State of Goa should devise appropriate measures to ensure that the able and healthy among the elderly can continue or get suitable work for as long as they can perform it. Some of the

possible areas where they can be more usefully engaged are teaching jobs, clearance of backlog of governmental work, social welfare agencies, cooperative undertakings and who so ever require. Otherwise a huge reservoir of rich human expertise will be wasted. Moreover, post retirement income from work should not be taxed to encourage willing elderly to be productive and economically active.

Education

The educational curriculum can include education on the family to enable the younger generation to understand and appreciate the elderly thus strengthening intergenerational bonds. Educational institutions should also be encouraged and assisted to develop out-reach programmes for interacting with the elderly persons on a regular basis and develop activities for them. The first of October every year declared by the United Nations as the Day of the Elderly should be celebrated in a fitting manner, especially in educational institutions and with community involvement.

Recreation

Life satisfaction is strongly related to satisfaction in leisure activities since the function of leisure is to give one relaxation, diversion and development of personality. Hence, suitable facilities are to be provided to the elderly in their respective villages to participate in recreational activities in residential areas.

Transport

The Goa Government has taken this into consideration and has provided identity cards to the elderly by the administration, fare concessions in all modes of travel etc. But more needs to be done in areas like reservation of seats in local public transport, modifications

in designs of public transport and strict enforcement of traffic discipline at zebra crossings to facilitate elderly to cross streets.

Research Promotion

Goan Society is greying at a faster rate than that of the Indian society. There are hardly any studies done on the elderly in Goa. Hence, the State of Goa should encourage research on ageing in Goa with a view to gain insights, evaluate ongoing programmes and identify new and potential areas. The Goa University should be assisted by the Government of Goa to set up a Centre for Gerontological studies.