AGEING IN INDIA - A CONCEPTUAL CLARIFICATION IN THE BACKGROUND OF GLOBALIZATION

Lekshmi V Nair, PhD, MA in Sociology
Indian Institute of Space Science and Technology, India

Abstract
The multifarious dimensions of ageing in India can sociologically be thought to be a series of transition from one set of social roles to another and such roles are structured by the social system. It may be mentioned that the process of ageing is not uniform for all individuals in the society. Thus, changes in the life of the old age, which is considered to be the sanyas ashram of the Hindu ashram theory, is influenced by the biological as well as the social and cultural systems. However, in recent times, the status and role of the old age population have been changed due to the technological developments that have colonized the outlook of the youths. The present paper tries to analyse how the recent development of globalization have changed the concept of ageing in India

Keywords: Globalization, ageing, elderly

Introduction
Ageing is a universal phenomena and every object in the earth undergoes the process of ageing. In the human society, ageing was considered as a social phenomenon rather than physiological, as ageing is always understood in the background of social milieu. A deeper understanding of ageing in the present day society needs the review of ageing as a process at the individual level and at the societal level. Globalisation and Westernisation has changed the worldly outlook of people and ageing is now having more implications to the individual and society as this process has now taken a new socio-economic dimension. This process has speeded up dramatically in the last two decades as technological progress make it easier for common man to travel, communicate, and do business internationally. Two important recent driving forces are advances in telecommunications and the spread of the internet. In general, as economies become more connected to other economies, they have increased opportunity but also increased struggle.
Like other social institutions, ageing is also a socially constructed concept and considered as social reality. In the traditional society, ageing was considered as a natural process whereas today ageing is a shared feeling of the organized groups namely family, peer group and society. (Morgan and Kunkel, 2001). Ageing is one of the few concepts that have a time frame due to the differential development perspectives of the respective countries. Demographic transitions, social conditions and political environment of the last few years are the important reasons for the changing views of the concept of ageing.

Globalisation has changed the face of India to a great extent in terms of development. Absence of a population policy and lack of effective communication on family planning/family welfare schemes during the preindependent days saw an increased birth rate on the one hand and on the other side medical and technological development saw the decrease in the mortality rate and the increased life span. Simultaneously India initiated its developmental process resulting in the demographic transitions. In the last five decades of development, steps taken to improve the health profile of the people have resulted in significant demographic transition that has affected even the shape and structure of the age pyramid. For example, in 1950, there were about 200 million persons aged 60 and over in the world and this figure now stands at 550 million, and is expected to reach 1 billion mark by the year 2020. “Even more dramatic is the expected increase in the number of very old people (aged 80+ years); that group is projected to grow by a factor of 8 to 10 times… between 1950 and 2025”. (Modi. 2001). Ageing scenario in India show that the number of people above 60 will be increasing in the coming years and by 2020, 11.1% population will be over 60 years and by 2040 this will increase to 17.5% and in 2050 the population above 60 years will be 21.3%. In absolute numbers by 2020, 1,415,230,000 people will be over the age of 60. (Bose and Shankardass. 2004).

The impact of globalisation on the old is multi-faceted. Primarily the old has to face two types of challenges, one from the family and the other from the society. The present day old who had a different socialization are at a cultural shock for the way the old is treated in the society.

Ageing – A New Concept:

Ageing is not an event but a process. For the development theorists and practitioners ageing is one of the most neglected issues mainly because they are disempowered and non resourceful persons. They are not considered as a class category or status group neither by economists nor by sociologists. Though ageing is universal, till a decade back ageing is considered as natural and evolutionary process and hence it is not taken seriously. Till 1980s the problems of the old were not known to the state in the developing countries
and therefore they are not attended. The mass culture and international communication, the byproducts of globalisation gave an idea to developing countries the need to take care of the old as this demographic category will be increasing year by year. There are many ways to reduce the child population whereas the old population cannot be stopped as the developing countries like Asian countries methodically ignored the structure of the population. The equilibrium theory experienced by the Western Europe in the early 20th century is being experienced by India today. The equilibrium theory has three stages. The first stage is known as the Stage of Equilibrium characterized by high birth rates (fertility) and high death rates (particularly infant mortality). In the second stage, birth rates remain high while mortality rates are on the decline. Finally, there is a returned equilibrium in response to a complex centric of social, economic and environmental factors: both birth (fertility) and death (mortality) rates decline and a state of equilibrium is reached. (Sen. 1994)

Ageing in the developed and developing countries may be seen differently as the developed countries have a different vision of ageing than that of developing countries. Globalisation undermines the disparities between the rich and poor, likewise within the countries the internal disparities are not taken into account. This is visible in the developed countries too. (Neysmith & Edwardh._1984). Globalisation saw new development models and correspondingly different population categories are given different statuses. The old in the developed countries are taken care by the state and are given a special status. In the developing countries where the globalization is in the process and the change is in transition all segments of population are in a dilemma as to their present and the future status. The children, the youth, the women and the old are undergoing a change in terms of their lifestyle, world outlook and the relationships in the society. When the children and the youth are able to adapt to these changes, the old are in an anomie mind confusing them and this is having a great impact on their immediate society. The consequence of this social phenomenon is that in the developing countries globalisation made the elderly people to move to periphery becoming a marginal underclass. During 1980’s and 1990’s the developing countries showed higher participation of elderly in the work force which is gradually declining due to changing social scenario. Rapidly changing family circumstances like the emergence of nuclear family, absence of traditional care takers and the absence of traditional support systems changed the elderly in their status and lifestyle. Government also did not seriously consider the problems of elderly as the elderly were considered as part of the family. Society as well as the Government did not envisage that the elderly will be pushed out of the family within a short span of time. (Sen. 1994.). Global economic recession of 1980s and the consequent global
restructuring in the following decade has severe impact on families. From 1990’s onwards the world is in the grip of globalisation which changed the attitude of people from dependency to independence. The worst affected population category was the aged as they became ambivalent when their support systems were removed or replaced by their own kins. The elderly were forced to move from center to periphery.

“Shifts from nuclear families may imply the loss of older persons’ roles as heads of families and a loss of decision-making functions and financial responsibilities. In rural areas, new patterns of land ownership and mechanization of agriculture reduce the opportunities for older farmers to adjust their work-load and carry out smaller tasks as their strength diminishes. In urban settings, the substitution of wage labor for independent work makes it difficult to adapt working conditions to the needs of aging. Access of the young to modern education can impair intergenerational ties undermining the status of older people by making their experience and attachment to tradition appear outmoded and irrelevant to technical progress.” (United Nations, 1991)

The concept of ageing had a new meaning at this time. The elderly who were the pillars of traditional social system were slowly removed and they became appendix in the family. The intergenerational support has drastically changed due to the new economic scenario. (Martin. 1990). The elderly today has become a dependent category of society. Though the elderly of yesteryears were dependent psychologically they did not feel they were dependent whereas today they are forced to become a dependent category.

**Elderly in the Changing Social Situation:**

Population ageing in recent years show that elderly population is not a balanced one as the female elderly are higher than male elderly. At the age of 60 men out number the females whereas as the age grows female outnumber the male. The 80+ population projection reveals that by 2016 men figure 36,13,000 where as women figure 53,46,000 (Bose) ie. 0.7% of the total population will be elderly females. Maximum old population is in the category of 60-64 (3.1%) which declines as the age increases.

**Table 1. India: Projected 60+ Population by Age Groups, 1991-2016 Males (in thousands)**

<table>
<thead>
<tr>
<th>Year</th>
<th>60-64</th>
<th>65-69</th>
<th>70-74</th>
<th>75-79</th>
<th>80+</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991</td>
<td>10,489</td>
<td>7,685</td>
<td>5,609</td>
<td>2,130</td>
<td>3,367</td>
<td>29,280</td>
</tr>
<tr>
<td>1996</td>
<td>11,579</td>
<td>8,483</td>
<td>6,192</td>
<td>2,351</td>
<td>3,717</td>
<td>32,322</td>
</tr>
<tr>
<td>2001</td>
<td>12,165</td>
<td>9,385</td>
<td>6,088</td>
<td>3,762</td>
<td>3,075</td>
<td>34,475</td>
</tr>
<tr>
<td>2006</td>
<td>14,414</td>
<td>9,919</td>
<td>6,745</td>
<td>3,671</td>
<td>3,394</td>
<td>38,143</td>
</tr>
<tr>
<td>2011</td>
<td>16,977</td>
<td>11,832</td>
<td>7,148</td>
<td>4,041</td>
<td>3,458</td>
<td>43,456</td>
</tr>
<tr>
<td>2016</td>
<td>19,864</td>
<td>14,037</td>
<td>8,558</td>
<td>4,260</td>
<td>3,613</td>
<td>50,332</td>
</tr>
</tbody>
</table>
Table 2. India: Projected 60+ Population by Age Groups, 1991-2016
Females (in thousands)

<table>
<thead>
<tr>
<th>Year</th>
<th>60-64</th>
<th>65-69</th>
<th>70-74</th>
<th>75-79</th>
<th>80+</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991</td>
<td>9,822</td>
<td>7,181</td>
<td>5,043</td>
<td>2,055</td>
<td>3,070</td>
<td>27,171</td>
</tr>
<tr>
<td>1996</td>
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<td>7,927</td>
<td>5,567</td>
<td>2,268</td>
<td>3,389</td>
<td>29,993</td>
</tr>
<tr>
<td>2001</td>
<td>11,476</td>
<td>9,322</td>
<td>6,274</td>
<td>3,743</td>
<td>3,061</td>
<td>33,876</td>
</tr>
<tr>
<td>2006</td>
<td>13,403</td>
<td>9,994</td>
<td>7,400</td>
<td>4,285</td>
<td>3,722</td>
<td>38,804</td>
</tr>
<tr>
<td>2011</td>
<td>16,114</td>
<td>11,819</td>
<td>8,062</td>
<td>5,141</td>
<td>4,425</td>
<td>45,561</td>
</tr>
<tr>
<td>2016</td>
<td>19,049</td>
<td>14,383</td>
<td>9,688</td>
<td>5,701</td>
<td>5,346</td>
<td>54,167</td>
</tr>
</tbody>
</table>

Table 3. India: Projected Proportion of 60+ Population by Age Groups, 1991-2016
Total Population (Percentage)

<table>
<thead>
<tr>
<th>Year</th>
<th>60-64</th>
<th>65-69</th>
<th>70-74</th>
<th>75-79</th>
<th>80+</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991</td>
<td>2.4</td>
<td>1.8</td>
<td>1.3</td>
<td>0.5</td>
<td>0.8</td>
<td>6.7</td>
</tr>
<tr>
<td>1996</td>
<td>2.4</td>
<td>1.8</td>
<td>1.3</td>
<td>0.5</td>
<td>0.8</td>
<td>6.8</td>
</tr>
<tr>
<td>2001</td>
<td>2.3</td>
<td>1.9</td>
<td>1.2</td>
<td>0.7</td>
<td>0.6</td>
<td>6.7</td>
</tr>
<tr>
<td>2006</td>
<td>2.6</td>
<td>1.8</td>
<td>1.3</td>
<td>0.7</td>
<td>0.7</td>
<td>7.1</td>
</tr>
<tr>
<td>2011</td>
<td>2.8</td>
<td>2.0</td>
<td>1.3</td>
<td>0.8</td>
<td>0.7</td>
<td>7.6</td>
</tr>
<tr>
<td>2016</td>
<td>3.1</td>
<td>2.3</td>
<td>1.4</td>
<td>0.8</td>
<td>0.7</td>
<td>8.3</td>
</tr>
</tbody>
</table>

Source: Growing Old in India Voices Reveal, Statistics Speak Ashish Bose, Mala Kapur

Many outside agencies are coming to take care of the elderly which changes the patterns of dependency among the old. The main difference between elderly of older days and today is that elderly of today consciously becoming a marginal person. One can even argue that the effect of globalisation on elderly is the derecognition of them by the family. An Asian perspective agrees that

“the position of the elderly has been under-mined by such factors as changing values, growing individualism, smaller numbers of children, the migration of the young to cities in search of employment, housing shortages in urban areas, the increasing participation of women in the labor market, and the devaluation of the knowledge and experience of the elderly” (United Nations, 1986, para.33).

**Changing Perspective of the Family towards the Elderly**

Today’s family is becoming a self centered nuclear family where the old people’s services are used whenever it is required. It is a common scene in the Indian families that the old people are used to look after the children when both the husband and wife go for work. This service usually comes to an end when the children go to school. Once the children are becoming independent the old become an unwanted or extra figure in the family. The new family culture accepts only the immediate members as members of the family and all the others are considered as members outside the family. The main reason for this is that economic recession and the economic orientation of the families which force them to keep the needs of the elderly at
peripheral. It is calculated that average expenditure for middle class elderly will be around Rs.5000 a month excluding the rent and clothing. Of this amount major expenses are for food and medicine. The dependent category of the elderly are denied the appropriate food and medicine. From the point of elderly this trend is an alien one as they have grown up in a different environment they are shocking and unable to adjust to pressure environment.

Dependency ratio of the elderly is very high and among the elderly females the dependency is higher. 70.6% and 75.7% of the urban women are totally dependent. When the dependency is more the demands of the elderly from the support systems are higher resulting in the conflict between the elderly and the support systems including the family. Several studies (Marshall et al. 1993, Ikkink et al. 1999, Brackill and Kitch, 1991, Murphy et al. 1997.) show that higher the dependency wider the gap between immediate family and elderly. The consequence is the institutionalization. The number of men compared to women is less in the old age homes which again show that the dependency is more among the women than men. There are other angles for the high rate of women in the institutions like increasing number of widows, migration of family members, easy adaptation to an environment and non resourcability.

**Changing Perspective of the Society towards the Elderly**

Elderly were considered as a social phenomenon in India till the early 1980’s. But now they are looked as an economic phenomena as the society is moving from humanistic (social) to materialistic (economic). This shift in paradigm in the approach of elderly is changing the elderly as a commodity. This process has taken place in a cumulative manner that even the elderly themselves feel the change in the attitude of people towards them. Population ageing and change in the family structure are serious problems in the developing countries. The nations are not ready to give up the traditions nor are they fully modernized in the approach. The decrease in the fertility rate and the changing roles of women made the society to look elderly in a different dimension. It is observed that in India, Tamil Nadu and Kerala will be having largest number of old population because the fertility rate has declined drastically and they have already reached to a replacement of 2.1 children per women. (Bhawalsar. 2001).

Social change witnessed by India in the last decade show that many social categories has transformed into economic and political categories. Elderly cannot change themselves into a political category or an economic category as they are not an organized group. There are two points to be noted here, in the first instance the materialistic world in which they live today is alienating them. Life-satisfaction and alienation among the aged are important concepts, as these have far reaching implications and can give us
an overall view of the larger populations ageing successfully or not in our society. In a study conducted by Kattakayam(2002) it was seen that elderly men feel more alienated than the elderly women; the elderly women are active in the kitchen and feel wanted by the family. Although the degree of isolation may vary, with urbanisation and nuclear families on the rise, elderly women living in metropolitan cities are more likely to feel socially alienated than their rural counterparts(Jamuna, 2003). India Today(2013) reports that the alienation that comes from urban living, which strangely enough also includes people living in close proximity to each other (in the apartment/ flat system), has a lot to do with the risks in modern living. This alienation affects the elderly a lot. After the children leave the nest, which they do in large numbers in middle class urban India, the parents are left to fend for themselves. The emotional vacuum is very hard to fill. The loneliness becomes worse under the threat of being robbed or murdered. In such situations the neighbourhood fails in its duty by not being on guard or vigilant enough.

In the second place, those who are having an independent income are forced to spend their money in a manner in which they do not like. As a result there is a constant conflict between caretakers and elderly(Thara, 2004). The Social exchanges are slowly shifting towards economic exchanges. When it is changing to economic exchange the elderly are exploited by the family and society. This economic shift has to be viewed in two ways from the elderly point of view and from the society’ point of view. The income generated by the elderly is used in the family but due share is not given to them(Sivakumar, D. 1998). In this context those elderly who has the knowledge about old age homes feel a deprivation and try to experiment by staying in the homes. Today there are many other public caretakers like paid servants exclusively for old, day care centers etc.

In the traditional Indian society the income was not a parameter for any person to be in the family unit as all kins were considered as social unit. There was no correlation between the earning capacity and looking after a person. The older the person the greater the respect he derived from other members of the family. Respectful relationships existed in the family on a hierarchical base. Even when a family is composed of four or five generations the system functions in such a way that no body is neglected. Joint family system of India was a unique institution where economics and politics were overruled by social relations (Reddy & Srinivas, 1996).

The effect of the global economic reorientation has looked the elderly as disempowered person. This resulted in the marginalisation of elderly or shifting the focus of elderly as an economic unit rather than social unit. In order to change the situation a model has to be derived where by elderly has to be considered as social unit. Empowerment of elderly is the
need of the day where they can be used by the family and society in effective way. The significance of being elderly is to be understood properly by the society so that the elderly may be considered as a social unit and not as economic burden. Change in attitude towards ageing and affirmation of the rights of older people is necessary for empowerment of people as they age to become the norm. Empowerment links to inequality, because inequality tends to become more pronounced at both ends of the life course. The negative impact of inequality is a barrier to reducing absolute poverty and hinders the fulfilment of a variety of human rights, including the capacity to be heard. Empowerment also determines ability to extend opportunity and to enhance capabilities (Sylvia Beales, 2012).

The activity theory by Havighurst, 1958 predicts that a vacumm in life lessens the total activity which reduces opportunities for others to validate one’s specific role identities and a general self concept. As a result positive self concept wanes and general contentment with life decreases. One way of changing society’s negative attitudes to aging and the aged is to motivate the latter to participate in more activities at all levels and in all areas of society. The Society today takes effort to change the status of elderly by various measures. Government, civil society and various organizations are taking the lead in this aspect.

The New Perspective in Ageing

Healthy Ageing, Active Ageing, Ageing with confidence, Happy Ageing etc are today’s concepts of ageing. They are considered as the goal of life by the United Nations and the World Health Organization (Kalyan Bagchi, 2003). It implies that if 90 yrs is regarded as the approximate target terminal age for older persons, in order to keep a person healthy, inspite of the continuing biological decline, healthy ageing has to be objective or slogan. In ancient Indian society ageing is considered as a stage of giving up all the worldly pleasures and preparing themselves for the next world. Those were the days when the individual accepts ageing as part of the growth. Today ageing is contextual and viewed differently by the society and individuals do not want to give up their ‘life’ during this stage. The former perspective of ageing can be related to disengagement and withdrawal from social life (Cummings & Henry, 1961) and the later is related to the activities and the continuation of the energy. (Lawton & Nahemow, 1973). The disengagement theory portends that an individual will gradually withdraw from society in preparation for death. While the rate of social activity would be expected to decline as the individual ages, the disengagement theory posits that individuals voluntarily withdraw from social roles and relationships. Moreover, societal expectations also mandated that older people withdraw from their roles to bring about opportunity for younger
individuals to make a life where the older person once may have thrived while the later theory builds on the intention to better harmonize the person and environmental perspectives in aging.

One of the common definitions of ageing is the physical disabilities such as hard of hearing and frequent illness. This definition is no more valid in the present day context as ageing is not related with physical well being rather ageing is looked from societal and state angles. Society considers a person as aged when he is unproductive. State considers a person as aged when he retires himself from the active participation of work (Shirodkar, 1995).

Both the definitions vary from state to state and country to country. Unproductivity or low productivity makes the people aged in the present day individualistic society. Ageing captured much attention in the last decade as every segment of adult population including the aged are supposed to be productive in one way or the other. Empowering the old persons is a great concern of the state in developing countries. The mental and physical well being is directly correlated to empowerment and disempowerment. The second definition of ageing from the state perspective is mainly to empower them with minimum comforts by giving economic and social privileges. The Government of India in its national policy has not directly defined ageing or old people but it considers a person as old when he crosses 60 years. (Bose and Shankardass, 2004).

Definition of ageing changes when it is combined with region, gender and class. Usually among the upper most brackets of the income groups aging is not a problem at all. Certain indicators of their living standards suggest that older people experience less hardship than expected, given their incomes. A possible explanation is that older people convert income into basic living standards at a higher rate than younger people, implying that as people age they need less income to achieve a given standard of living (Berthoud et al, 2009) It is observed that except for the bureaucrats serving for the public sector undertakings others have no retirement. Hence ageing for the latter is not an issue. Women of this category do not lose status because even when the age advances their husbands are active in their respective fields. Only after the spouses’ death they feel that they are aged. Ageing is a problem in the lower upper class and middle class as these groups go for modernization of their institutions at a greater speed than the other population categories. Increasing cost of living and the materialistic way of life force the families of this class to be more self-centric in nature (Nayar, 2004). They are reluctant to take care of people who are not productive. Migration is an added problem in this category. States like Kerala experience this type of old age problem. Institutionalisation is the resultant factor of this problem.
Another dimension of ageing is widowhood. Usually a woman feels old when she becomes widow. Society also considers widows as marginal persons because of age and status. Ageing women in rural India today face a triple jeopardy. First of all the jeopardy of aging in a society, where old people are increasingly being perceived as a burden to a shaky economy. The second source of jeopardy is that of being a female in a male dominated predominantly patriarchal society, where femaleness is devalued. The third jeopardy is due to the existing conditions in which most women live. A large majority of women living in rural areas are under the grip of poverty or are dependents in urban areas (Indira, 2003).

Yet another dimension of aging is the ageing among the lower class people. Among the lower class ageing is associated with illness as majority of them do not have formal retirement. The able body works as long as they can work and after that they become “old”. Ageing among lower class have regional variations too. In the rural areas the aged are looked after by the community whereas in urban areas they are totally neglected. Either in the house or in the institution they are unwanted. It is a common scene in the house and institution the old living as neglected human beings.

Over a period of time the concept of ageing has undergone several changes. In the developing countries this process is continuing. Countries like India and China where the old population is on increase the concept has to be made clear so that the population policy and the rehabilitation process will take a systematic progress. The household rehabilitation, and community rehabilitation will change the perspective of aging concept.

In the future old age has to defined as a new social phenomenon as the elderly were participants in the management of affairs of the family, community and larger society. Thus they should have the right of power, and every welfare state as Gransci puts it has a popular consciousness where all categories of people are to be treated as societal partners. The neo-Marxian group lead by Gransci, Georg Lukacs and Althusser refers that the class struggle of the next century will be between the various groups holding different ideology. Here it will be the clash between the cultural ideologies where groups of people, either biological group i.e. gender groups or age groups or ethnic groups become the classes.

Ours is a poor country belonging to the traditional eastern cultures where family ties continue to be strong. To provide even a semblance of social security to the sixty million elderly would need at least 60,000 million rupees per annum, an amount that would eat into the very vitals of our national budget. Hence, state care is just out of question and should not be encouraged.

The government can come out with wide ranging schemes of supporting family care through subsidies and incentives and by encouraging
self-help schemes of income generation and security for the elderly to make them financially viable. Voluntary agencies and community support for elderly should be re-in forced. Support for the destitute should be easily available. Opening of day care centers in every villages and ward become a useful adjunct to the family. Also community run neighborhood caring networks, (necanets) and community elder homes need to be organized (Ramamurti, 1996). They can be served by hospital staff and organized around hospital areas with a mobile van to go round the homes extending medical services. The elderly of the next century will become a conscious and powerful group from the point of view of political participation. Indeed they will be one of the largest groups who will decide the destiny of the state. The group which wields power in the informal and primary institutions will be one of the most sought after groups politically. This becomes more visible when they are under the care of institutions. As Habermas puts forward in his theory of rationalization of culture in the light of Marxian and Weberian theories, the old age culture will be twisted in favour of the state whenever it is required by them. This process is to be watched and taken care of by the policy makers who are interested in the welfare of the old., Kumudini Dandekar (1996) argues that the thrust of government programmes and policies should be directed at providing old-age pensions. This is not only because the old are both well-integrated with their social milieu and not favourably disposed towards living in old-age homes, but also because pension schemes are a cheaper alternative.

Gerontological and geriatric research should become complementary to each other and the Government and the Universities concerned will make a serious attempt to break the wall which stands between them. The definition of aged may be viewed from a holistic perspective, keeping in mind longitudinal and cross-sectional diagnosis of the issues concerned. Women’s Studies, Gerontological studies should move away from the traditional methodology and should not shun away from experimenting with the interdisciplinary and multidisciplinary approaches. Researchers, academicians, scientists, policy makers and administrators should seriously take it as a challenge to promote study and research in this area, so that the results can be applied universally to understand the various dimensions and concepts of aging and to evolve scientific and systematic solutions for them. In the future, one should be able to follow the emancipation perspective in defining ageing. It gives priority to the liberation of the aged from the exclusion of social, economic and political participation in the society. In fact, the emancipation perspective is defined as creation of a sense of social identity of aged in one extreme, and, as an instigate to social, economic, political welfare of the aged individuals on the other extreme. In essence, the liberation perspective provides relative privilege in socio-economic, political
and psychological aspects of aged through the construction of a sense of age consciousness, which leads to the provision of social security. Elderly women has to be treated as a special category as the labor they have put in during their younger years have no equivalence today and they can have and feel a class viz.,a viz, dialectical materialism derived from emotional and materialistic struggle. Social engagement fulfills the mind and body of the aged and thus we could bring an improvement in the life of the elderly of today and tomorrow.

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