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Communal Effect Attitudes on Punjab Senior Citizens

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ABSTRACT

Among the most vulnerable groups in society is the elderly, who face issues such as a deteriorating feeling of self-worth brought on by physical weakness, a dwindling social position, and limited financial resources. Feelings of insignificance have been exacerbated by the fact that families are finding it more difficult to care for the elderly due to socioeconomic and demographic changes. As a result, psychological difficulties frequently outweigh outward indications of aging as people age. With a specific focus on 260 senior individuals in Punjab between the ages of 60and90, this study sought to investigate the effects of family and social attitudes toward the old. The majority of respondents claimed financial independence, but only 11% reported having stable finances due to rental income and savings account interest. But 8% struggled to pay for everyday needs, and some experienced severe financial difficulties related to fundamental needs and family responsibilities. Remarkably, only 11.7% of older people consistently created strong social relationships, compared to 76.6% who did so on occasion. Furthermore, 16.7% of respondents admitted to their situation, suggesting a greater dedication to maintaining family togetherness. The behavioral changes aligned with the perceptions of 83% of senior respondents who observed a shift in the way older persons view their basic obligations. Family dynamics, economic dependence, physical abuse cases, feelings of isolation, inadequate social support, family members' disdain, and food-related issues were among the main concerns. The study emphasized the complex relationships that exist between aging, health problems, decreased physical activity, and elder abuse. It also clarified the critical roles that qualities, social interactions, financial dependence, and behaviors have in influencing these relationships.

Keywords: Family Attitudes, Family Dynamics, Elder Abuse, Economic Dependence, Aging
JEL Classifications: R0, P2, O0, M5

1. INTRODUCTION

The elderly is a vital group of any nation's population and deserve the same respect and care as the other demographic groups. Modernization and India's rapidly expanding industrial base have had a wide range of effects on individuals. Slowly but surely, the joint family custom that was founded on love, devotion, and tradition is vanishing from Indian society. Family life has also changed as a result of it. Instead of combined or joint, people have begun to believe in the "Nuclear family." People are now forced to live with people's own families, which include people's husbands, wives, and kids. This culture has also had an impact on each person's emotional state. Parents nowadays are terrified of people's children, so people have started relocating to nursing homes where people live with a sense of inner peace (Lalan, 2014; Zharovska et al., 2022; Milivojević et al., 2021). The most dangerous situations that the elderly face are loneliness, carelessness, and a loss of importance. People also face illnesses brought on by ageing and lack of treatment. Remarkably, people's family members on whom people rely the most are the ones who assault them. Undoubtedly, compared to the kid cohort, the elderly is a group that is significantly more dependent on the working class. The requirements of the elderly are also very different from those of the population of children (Kiiza Wamara and Carvalho, 2021; Yan et al., 2022).

Elder abuse by family members and society as a whole is the most significant issue that seniors confront. The presence and lives of

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older members of people's own families have been impacted by the widening generational divide, differences in expectations and expectations-related thinking and attitudes, and living situations or lifestyles of children. The attention that is needed by vulnerable old people is also being neglected due to factors including restricting family size, increased financial strain, and children's desires for a better or elite way of life. Older people do not necessarily need to rely on the aid and support of family members, but people do require additional care and attention as a result of sensory system loss and physical strength loss as people age (Sugisawa, 2022; Behtoui et al., 2020). As a result, many senior citizens feel lonely and have little possibilities for social engagement. Lack of amenities like parenting facilities and leisure areas worsens the issue. Due to these effects of despair, many elderly people have attempted suicide in this century to terminate people's difficult lives. Numerous studies in Punjab have emphasised how important it is to provide care for elderly people because Punjabi families place a great value on people's elders and view at the top of the hierarchy.

In India, old age homes are a recent development, for-profit homes (sometimes referred to as "pay-and-stay" homes) and community-based services are recent advancements in eldercare. This new kind of residence, which resembles retirement homes in the United States, was created in response to the increasing needs of middle-class and upper-class families whose younger members are unable to care for people's elderly relatives (Maurya et al., 2022; Olmos et al., 2023; Harper, 2022; Wasal, 2019). Older residents in institutional care settings are particularly defenceless and hence more likely to experience abuse, but few nations have examined the scope and character of this phenomenon in national research. The mistreatment of older people is linked to a variety of adverse health outcomes, including minor injuries that result in permanent disabilities, long-term psychological issues, suicide attempts, and an increased risk of hospitalisation, institutionalisation, and premature death. Elder abuse in the family, society and the old age home is a global public health and human rights problem. Additionally, elder abuse has social repercussions that include medical fees for hospitalisation and emergency treatment as well as costs associated with prosecuting, reprimanding, and rehabilitating offenders (Saif-Ur-Rahman et al., 2021; Botngård et al., 2020; Brown et al., 2021). Hence this research thoroughly examines the actual situation of the elderly living in nursing homes, the attitudes of society towards the elderly, the good or bad behaviour of the elderly by family members, and the elderly's satisfaction and dissatisfaction with the amenities offered to the elderly. The vital contribution provided by the journal is elucidated less;

- To understand the financial situation, social standing, cultural standing, and health of Punjab's elderly population and to determine if older people are satisfied or dissatisfied with the amenities offered to them.
- To research how the general public feels about elders and people's dignity and to learn whether family members are treating elders well or poorly.

The objective provides new information on the many issues facing Punjab's senior citizens, making it simple to identify solutions to issues including social, economic, cultural, health, and a lack of other facilities. Along with this, individuals with modern viewpoints will receive up-to-date knowledge regarding social and familial mentalities. The investigation content is organized as follows: The literature review is presented in section 2, the suggested framework is presented in section 3, the discussion of the new viewpoint is presented in section 4, the research is concluded in section 5, and suggestions for enhancing the situation for older people that have gotten worse are provided in section 6.

2. LITERATURE REVIEW

Chaurasia and Srivastava, 2020 determined the prevalence of elder abuse and also attempted to look at how different elder abuse instances were affected by various socioeconomic factors, chronic illnesses, and so on. To understand the profile of senior people who have experienced any abuse, violence, neglect, or disrespect, the statistical analysis was based on descriptive statistics, the Chi-square test and binary logistic regression were utilized. Overall, 11% of elder abuse cases were recorded, with verbal abuse coming in at the highest rate (90%) followed by disrespect (52.5%) and neglect (45.21%). Male physical aggression was prevalent, but 61% of women felt abandoned in society. About 80% of older people in rural regions experience various forms of maltreatment. The results show that verbal abuse (66.34% within the family) and physical abuse (45% outside the family) were the most frequent forms of violence. Future investigations required on topics will advance knowledge of the connection between elder maltreatment and social support.

Chandanshive et al. (2022) tried to describe the frequency, pattern, and contributing elements of elder maltreatment in urban slums. The research adopted simple random sampling in the current investigation, which helps to reduce selection bias and other design effects. A self-designed questionnaire was used to evaluate the morbidity profile for the risk variables connected to elder abuse. In contrast, validated measures were used to evaluate the HMSE-based cognitive state, the Barthel Index for Activities of Daily Living dependence, and the 15-item Geriatric Depression Scale. In addition, a screening tool called the Vulnerability to Abuse Screening Scale (VASS) was employed to assess for elder abuse. This study's prevalence of elder abuse was 19.4%, which is consistent with findings from other research conducted in India and throughout the world. Physical abuse was the least frequent kind of abuse (3.3%), while emotional/psychological abuse was the most prevalent (11.1%). Most of the time, sons and people's spouses were the abusers. Given the length of the interview process, the current study excluded older adults with significant mental, visual, or hearing impairment.

Awal et al. (2020) employed a variety of statistical approaches to establish the abuse and neglect status of senior residents in Bangladesh's Chitmahal districts. In Northern Bangladesh's Lalmonirhat, Nilphamari, Kurigram, and Panchagar districts, the current study is carried out in the old Chitmahal regions. A total of 141 Chitmahal areas are present; 36 are randomly chosen as the study region, and 270 elderly households are then involved. Using a pretested structured questionnaire, data on the respondents' and people's family members' sociodemographic, economic, health

condition, abuse and neglect-related variables were gathered. Age of the elderly, educational level, respondents' previous and current occupations, home ownership, monthly family income and expenditure, and people's participation in social events are the common significant factors for various forms of abuse and neglected status of the elderly in Chitmahal areas of Bangladesh. Respondents tend to older people, so occasionally people have trouble in recalling the subjects.

Srivastava et al. (2021) investigated the living arrangements and marital status related to depression in older persons. The study also seeks to assess how elements like socioeconomic circumstances and other health issues affect the likelihood of depression among older persons in India. The Longitudinal Ageing survey in India (LASI-2017-18), a nationally representative survey, provided the data for this study. 30,639 seniors aged 60 and over made up the real sample size. Bivariate analysis and descriptive statistics have both been used to estimate the prevalence of depression. Additionally, binary logistic regression analysis was used to investigate the effects of living arrangements and marital status on depression in older persons in India. The study demonstrates the susceptibility of bereaved elderly people who are living alone, as well as that of those with low socioeconomic level and health issues. The study's cross-sectional methodology, which prohibits inferring causal relationships between variables, is its main drawback. It is crucial to keep in mind that some people face increased loneliness as a result of depression or a lack of energy.

Joshi and Chalise (2021) major goal was to investigate elder abuse experiences and how people relate to older people's quality of life in rural Nepal. A cross-sectional, community-based study was conducted in Nepal's Kailali district. 547 adults aged 60 and older were randomly chosen to make up the study's whole sample size. The WHOQOL-BREF scale, a well-used proxy for (Quality of Life) QOL, was used to calculate QOL. By asking questions on senior maltreatment that occurred throughout the previous month, elder abuse was quantified. The data analysis method employs the descriptive approach. To analyse the data, descriptive, Chi-square tests, and F-test were utilised. According to the research, 14.3% of women's and 15.6% of men, respectively, experienced some form of abuse in the previous 1 month. According to this study, the general QOL score of senior Nepalese people was moderate (12.92 ± 1.75). When compared to those who did not encounter any abuse (13.04 ± 1.73), the mean scores of the total QOL index for those who experienced abuse were considerably lower (12.28 ± 1.74). Because the respondents were from a rural area in the Kailali district, the study's conclusions not applied to the entire senior population of Nepal.

Dolai (2021) intended to investigate the nutritional risk that older women face, as well as the psychological and socioeconomic aspects that linked to that risk or malnutrition. This study, which included institutionalised senior women, was cross-sectional in nature. Older women (60 years and older) living in six Old Age Homes in rural West Bengal, India, participated in the study. 95 individuals who lived in remote Old Age Homes were a part of the study. A pre-designed survey schedule incorporating the Mini Nutritional Assessment (MNA) Scale and the Geriatric Depression Scale (GDS) was employed for this particular study. To determine the relationship between/among variables, an intergroup comparison and Chi-square test were used. According to the study, 38 participants (40%) were "at risk of malnutrition" and another 40 participants (44%) were "malnourished" out of 78 "possibly malnourished" older women. There were "at least" 53.68% of individuals who had moderate depression. 40% of had significant depression and were at "risk of malnutrition," despite also being "malnourished." Specifically, a large-scale qualitative research methodology that have allowed for a more thorough evaluation of the factors influencing the study population's status was not used.

Agadi and Baikdey, 2019 goal is to understand senior citizens' experiences living in nursing homes. The study investigates the reasons why people end up living in old age homes, the health issues people face, and recommendations for better amenities in the aforementioned houses. The senior inhabitants of an old age home in Kalaburagi, Karnataka, were the subjects of the current exploratory research. Six case studies were conducted with prisoners who were 60 years of age or older, and the individuals' previous oral agreement was secured earlier interviews were conducted. The case studies showed that the elderly had ended up in these institutions because of the carelessness of people's family. All of the inmates experience physical and mental health issues, which have an impact on everyday living. Although this study is only focused on one old age care, there is room to investigate related topics in other old age facilities.

Dhungana and Dhungana (Dhungana and Dhungana, 2020) aimed to investigate the health of senior residents in nursing facilities. By employing a systematic questionnaire and interviewing approaches, information was gathered from 57 older persons who resided in three of the largest nursing institutions in Pokhara. The elderly who is able to not verbally consent to participate in the study and who had serious psychiatric disorders, were unable to talk, hear, or finish the interview procedure. The analysis used in this study was descriptive. Back pain was the most common chronic physical health issue reported by respondents (87.7%), followed by various musculoskeletal issues, gastrointestinal disorders, hypertension, respiratory issues, diabetes mellitus, heart conditions, and difficulties with the eyes and hearing. Compared to men, women were more likely to have a chronic physical health issue. The lack of social connections, inadequate medical care, fear of the future, a lack of recreational activities, the management of the food in old age homes, the surroundings of elderly officials, the sitting and sleeping conditions in old age homes, and others were the top five concerns among the respondents, each followed by 50% of those who were concerned. The only chronic physical health issues affecting the elderly are the subject of this investigation.

Shivarudraiah et al., 2021 investigated the psychological care requirements that residents of nursing homes have expressed. Out of the 4 old-age homes that were approached and employed for the study, the researcher used the purposive sampling strategy and had a sample size restriction of 20. The requirements which are

considered in the study are: (a) age adulthood at least 60 years old, residing in an old-age home, and consent in writing; (b) people have been there for at least 1 year; (c) people to communicate in Kannada or English and have completed at least a 10th-grade education; and (d) people both male and female. A semi-structured interviewing guide was used to gather qualitative data. In collaboration with five experts—two psychiatric social workers, one psychiatrist, one psychologist, and one mental nurse—the researcher updated and verified the interview guide. People were all professionals with backgrounds in geriatric mental health settings. Small sample size and deliberate participant selection are a couple of the study's weaknesses, which restrict the generalizability of its findings.

Shajahan (2020) objective was to evaluate the psychosocial issues affecting the older population, specifically about a few old age homes in the Thiruvananthapuram area. The study was constructed using a descriptive research approach. The old age facilities were chosen by lottery, and the researcher utilised basic random sampling procedures. The study included 50 institutionalised elderly people from old age facilities. The researchers discovered that the older residents of the chosen nursing facilities suffer from geriatric conditions such as vision impairment, physical issues, respiratory problems, and lifestyle diseases. Children's misbehaviour and financial hardship frequently cause older people to feel ignorant and devoid of emotional support, which frequently forces to live in nursing facilities. The researcher recommended offering leisure activities, group therapy, and counselling to aid with the subjects' adjustment and psychological issues on a daily or monthly basis but this is not affordable for middle and poor age adults.

From the literature review additional research is required to understand the relationship between elder abuse and social support in (Chaurasia and Srivastava, 2020). Elderly persons with severe mental, visual, or hearing disability were not included in (Chandanshive et al., 2022). Because respondents are elders, people have problems remembering the subjects, hence the answered questions having the probability of true or false in (Awal et al., 2020). (Srivastava et al., 2021) primary flaw is the use of a cross-sectional approach, which forbids drawing conclusions about variables' causal links. The findings of the research not generalised to the full senior population of Nepal because the respondents were from a particular location in (Joshi and Chalise, 2021) long with that large-scale qualitative research methodology was not used in (Dolai, 2021). Although (Agadi and Baikdey, 2019) just examines limited old age facility, and (Dhungana and Dhungana, 2020) focuses solely on the chronic physical health conditions that only affect the elderly. In (Shivarudraiah et al., 2021) the study's flaws, including its small sample size and selective participant pool, limit the generalizability of its conclusions. In (Shajahan) the recommended therapies are not affordable in middle and poor class elders. The economic situation, social engagement, respect, amenities in houses as well as older residences, and independence of acting on people's own; medical care are not well described in the reviews in Punjab. Hence this journal will provide readers a detailed picture of how seniors affected by the society and the own members of people's family in the Punjab.

3. METHODOLOGY

The study's domain is the elderly people in Punjab who are 60 years of age and older. The Census data from the 2011 Census was used to explain the elderly population in the districts of Punjab. According to the Census of 2011, there are 27.7 million people living in Punjab, and 2.87 million of are adults, constituting 10.3% of the population. The elderly from the Sri Muktsar Sahib district, namely Sri Muktsar Sahib and Gidderbaha of the Malwa area make up the study's target population. 260 respondents, aged 60 and older and from various socioeconomic statuses from each Tehsil, were randomly chosen to provide adequate representation of the elderly. Each respondent was questioned separately according to a structured interview schedule. Standard information about the elders in Punjab state was gathered from a variety of books, periodicals, census records, reports released by government and non-government organisations (Bahadur 2018; Grover et al., 2021; Sharn, 2016; Kaur and Deol, 2021; Crocq, 2003).

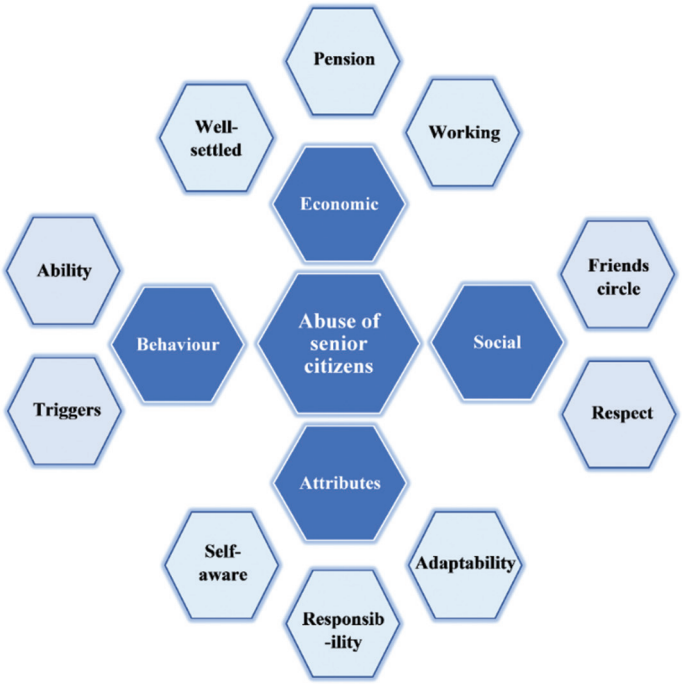
A systematic framework has been created utilising primary and secondary data to analyse information on the attitudes of society and family members towards elderly people in the Punjab state. According to Figure 1, which divides the study methodology into four main categories, the economic, social, behavioural, and societal factors are the main causes of elder abuse. Along with that the elders are increasingly slipping through the cracks in family care due to shifting family values and children's financial obligations which is explained in detail in the following sections.

4. RESULTS

4.1. The Financial Contribution of Senior Citizens

Every human civilization has recognised the importance of the family as the foundation of all human communities. The closest

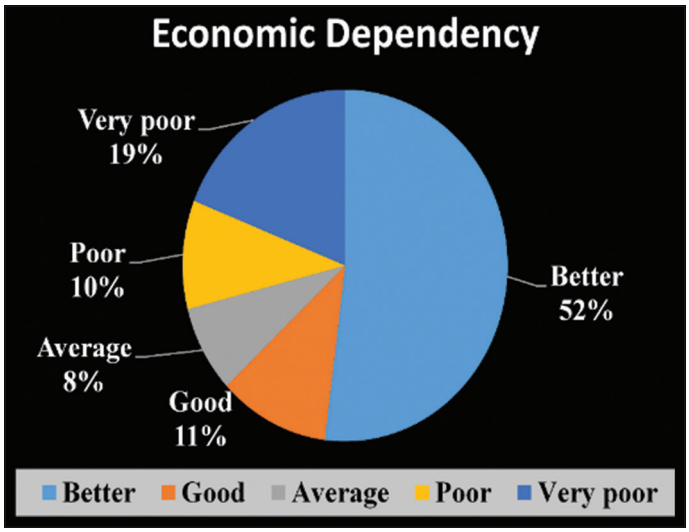
Figure 1: Framework for exploitation of elders



social institution to us is family, and its impact seen in daily life. Numerous psychological issues strike the elderly population. The main issue Indian seniors face is insufficient income. The most vulnerable individuals are those who do not have productive assets, have little to no savings or income from prior investments, do not have access to pension benefits, or reside in families with numerous dependents and low and uncertain incomes which directly affects the quality of life.

Based on the structured interview the pie chart has been plotted for the financial status of the respondents which is depicted in Figure 2. According to the data, 52% of elders have a better financial situation because of people's own earnings in old age, 11% have a good financial situation because of people's struggles in youth, 8% struggle a little for day-to-day expenses, and the remaining elders have a completely worse financial situation in terms of food, medicine, and people's families. The primary sources of income for the respondents have been pensions and family pensions, interest on savings accounts, dividends on savings, business, profession and rent from residential properties. The majority of responders asserted people's financial independence. The proportion of respondents who depend on people's children or other close family members to meet people's basic requirements, such as for food, shelter, medical care and transportation. Despite the fact the elderly provides for the family, people act like children. Family members are busy with people's own lives, so people struggle to give the extra attention people crave. This renders older people less insured and more susceptible to emotional disorders. Homes for the senior are the best option for senior persons who live alone, struggle with health issues, depression, and loneliness. The barricades of modern life have been built, and time has become extremely valuable in this rat race, leaving old people alone. The adage "A home is heaven where the young and old are cared for" is true. As a result, the idea of senior living communities where people's loved ones find a happy medium has gained popularity. Old age homes provided much superior services, including medical care, recreational amenities, safety, space availability, and personnel availability. Compared to public old age homes, the quality of life in private old age homes was much better. Raising ageing awareness among the general public and among medical professionals is necessary, as is facilitating older people's access to proper healthcare, to reduce the gap between old age homes, the family, and the community. Health education emphasise that depression and dementia are actual illnesses, not merely the normal results of ageing, and specifically focus on teaching the public and health professionals how to recognise the symptoms of mental disorders. In the past, older people enjoyed a great level of influence and position due to people's solid financial situation and cultural expectations, but today people's standing has diminished as a result of shifting family norms. Children are no longer dependent on parents for people's livelihood since people are able to make a living by choosing a job that is independent of parents, therefore the elderly do not have a strong influence on family economics.

Figure 2: Financial status of respondents



4.2. Social Relationship of Age Adulthood

In terms of the social standing of the elderly, Punjabi society has always had a high regard, respect and dignity for human life. Old age is valued in traditional Punjabi society as a sign of knowledge, piety, and respect. This ascribed to the close bonds that existed within the joint family structure, which was supported by religious principles and elevated the position of the senior population. Due to the fact that the majority of people in Punjab are Sikhs, the family structure in this state is impacted by Sikh culture and beliefs, where caring for and sharing with others is the norm rather than the exception. In Punjabi culture, the old once held a high prestige, but this standing has since deteriorated for a number of reasons. Viewing and finding western family structures as more attractive result from the inflow of Western culture brought on by the media, emphasizing individuality and other external influences. The general consensus is that young people want to more independent, and newly married couples prefer to live independently and do not want to live with parents for privacy concerns. The life of the elderly has become fairly difficult due to the shifting social structure and cultural system of the society, which are the unavoidable results of industrialization, urbanisation, and migration in the Punjabi as well as the Indian culture. Older people were discriminated against in public places like banks, buses, stores, and on the roadways as well. The people were considered sluggish and people assumed that elders had hearing problems and spoke in loud tones. Many two-wheeler drivers showed insensitivity to while the people were on the road. The benefits of elders' social engagement and support of intergenerational connections extend beyond themselves to kids, families, and society as a whole. Family members' abusive behaviour is greatly influenced by the personality and perspective of those providing care. This will greatly impact the personality which will greatly impact the social relationship. Elders who had a prominent position at work in the younger life received a great respect, which decreased ignorance.

Figure 3 makes it very evident that the majority of older persons preferred to avoid social interaction with people's neighbours and the wider community. It is evident that 68.3% of seniors do not favour social interventions, whereas 11.6% favour building positive relationships with the community. 7.1% of senior citizens only interact minimally with society for personal gain.

The primary cause of this problem is people's houses, whether the people are a nuclear family or a mixed family. One-third of the adults in the nucleus of a family like participating in social interventions, while a second third prefers to just touch society for the greater benefit. The final third of aged adults choose to remain close to people's families over maintaining social ties. According to the scientific research, strong social connections reduce the risk of a variety of morbidities as well as all-cause death. Social engagement involves intergenerational solidarities in addition to success in areas of life including interpersonal interactions and relationships, communications, learning, knowledge application, community, and social and civic life. Elders encourage the dissemination of information, serve as consultants, provide people's thoughts and guidance on practical, moral, and spiritual matters as well as on life attitudes and behaviours to adopt towards others.

4.3. Attributes of Aged Adults

According to the study, there is a high frequency of violence against older people in families and in society as a whole due to a lack of personal characteristics. However, this violence has not been widely documented in many areas, making it significantly underreported. Ethical attributes are those that characterise a person as someone who consistently upholds stringent moral norms. The characteristics of older people place a high value on caring since, as parents, most of focus on making money for people's families, which results in inadequate child care and the absence of kindness towards the children. As a result, there is little prospect of care throughout old age. The lack of attributes that impacts a deterioration in the family is shown in Figure 4.

Figure 4 makes it obvious that the characteristics that every family possess. Moreover, there is a direct connection between elder abuse and changes in the make-up and roles of families. In joint families, the old persons are more secure, safe, and capable of living with dignity, it has been discovered that elderly individuals frequently experience abuse from people's own children because of lack of attributes. Strong character traits have had a significant impact on how people live, interact with others, choose careers, and make decisions. In a traditional Punjabi family, where people were revered and held an authoritative position, the elders used to serve as a focal beacon. Today's technology governs how people live and conduct people's lives. It mostly controls our daily activities, quality of life, health, environment, and surrounds, thus it is evident that both older and younger people adaptable to strike a balance between traditional and modern ethics. The following Figure 5 clearly explains the attributes proportions of aged adults in the state of Punjab.

Figure 5 shows that the 16.7% of older adults genuinely love people's families and are willing to share everything people know. Since 65% older persons lack the ability to adapt and learn, thus it is the job of the younger generation or people's sons or daughters to change people's mentality regarding the elders. Furthermore, 16.7% of the elderly are just aware of people's predicament, which motivates to act more responsibly to keep the family together and avert dissolution. It is also true that modern day existence is stressful, especially in joint or extended families because of excessive demand in housing. Increasing life expectancy, physical and functional infirmities necessitating help, generational differences, etc. are some of the problems threatening the attributes wellbeing of elderly people in the nation. Therefore, in the current situation, it is necessary to seriously examine elder's well-being with a specific focus.

4.4. Behaviour Impact of Elders

The ageing process causes a noticeable decline in strength and ability which is linked to overall bodily ill-health, and decreased

Figure 3: The proportion of older people's social relationships

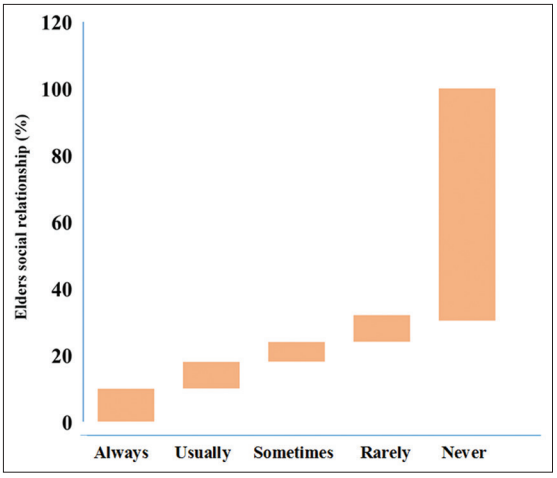


Figure 4: Tree decay simulations of attribute representation

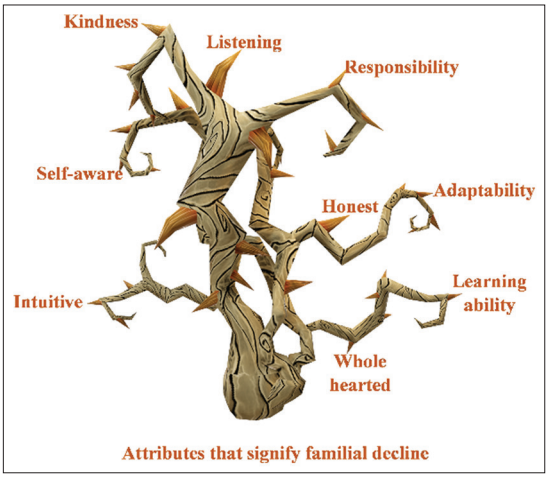
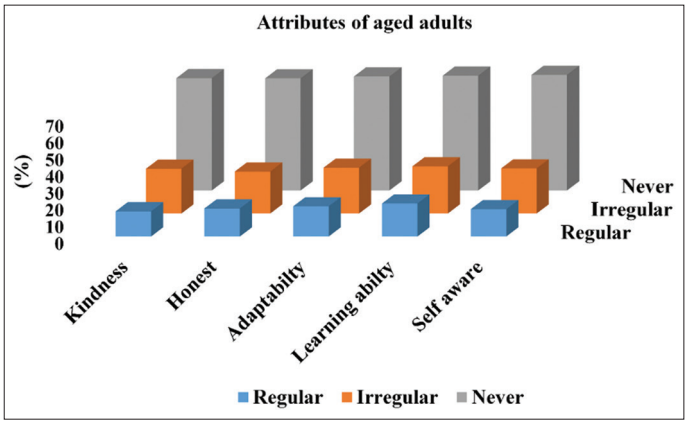


Figure 5: Characteristics of elderly people



physical and functional fitness. Strength is a proven method for slowing and partially reversing the loss of strength that comes with ageing. Most research has usually indicated that the ageing process invariably results in a drop in physical activity and variations in age-related decline of lower body strength and upper body strength. The use of cigarettes and excessive alcohol usage also affects how seniors behave in families and society. Because of people's drug addiction, the majority of seniors suffered reputation damage from people's adulthood age. Figure 6 illustrates the variables that have a direct impact on how older people behave in the society and the family.

Ailment and drugs are the two main factors that influence the behaviours of both older people and young people. The majority of elderly people had headaches, backaches, fevers, coughs, insomnia at night, diabetes, and allergies as a result of ageing. These conditions are directly correlated with eating habits, alcohol intake, and smoking behaviour. Other risk factors include consuming betel nuts, poor dental and oral hygiene, and using immunosuppressive drugs. In joint families' old people are more secure, protected, and able to live with dignity, it was discovered that elderly persons frequently experience abuse from people's own offspring because of the behavioural change. Unexpectedly, the elderly who experience abuse reside with relatives, and people choose not to disclose the abuse to protect the family's reputation. It is also noted that the majority of the abuse came from the most dependable of sources, with the son being the top abuser and the daughter-in-law coming in second. The most alarming revelation is that people are verbally abused every day due to the alcoholism culture in the family. Alcohol misuse is plainly harmful to the brain, causing both acute and chronic mental illnesses, ranging from delirium tremens, hallucinations, and dementia to drunkenness with cognitive impairment. As a result, carers neglected people's elderly parents or did not care for adequately. So, the elderly has begun to live in people's blood relation houses or age-old homes due to the lack of people's physical ability.

The senior men's health state was strongly correlated with people's eating habits. It indicates that eating habits have a direct impact on an older population's status because people help better manage health conditions related to the aging as well as the mistakes done in people's adulthood period. Ageing invariably results in a fall in physical activity and changes in age-related strength decline. As people age, people's upper and lower body strength varies. Although some family live in a joint household, people's extended family does not provide with food; as a result, elders maintain a separate kitchen for themselves. According to the World Health Organisation, one of the leading causes of death among older individuals is dietary issues. It uses an etiology-based definition of malnutrition that considers both overweight and underweight people. On the one hand, ageing increases one's susceptibility to malnutrition since it causes a drop in basal metabolic rate and lean body mass. Degenerative illnesses including cancer, diabetes, osteoporosis, and cardiovascular and cerebrovascular disorders, which are among the most prevalent and also diet-related diseases, begin to develop more rapidly as people age.

The responsibilities of older individuals are drastically altering as a result of the loss of physical and mental power. Figure 7 clearly

Figure 6: Behavioural effects of seniors

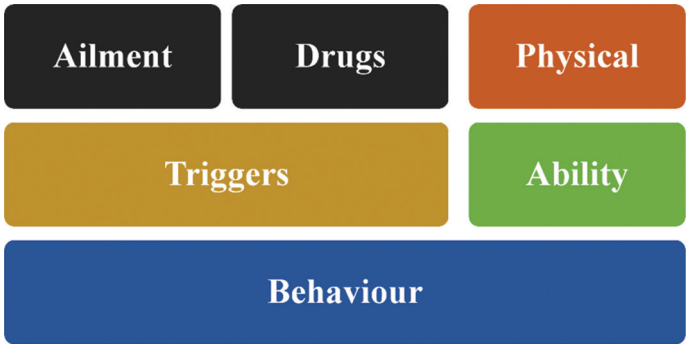
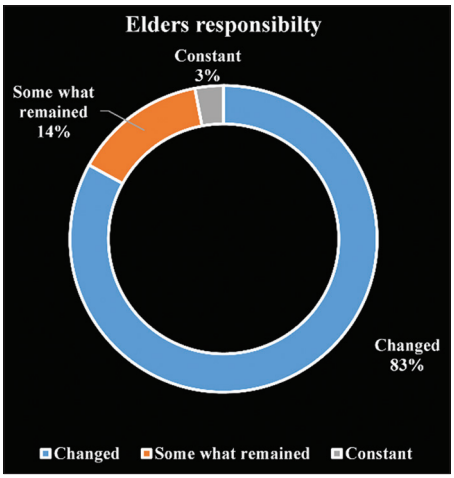


Figure 7: Responsibility changes in the family



demonstrates that more than 83% of the elderly respondents believe that the roles have greatly altered. The primary causes of this problem include ageing, loss of physical ability, and changes in the family members' conduct. Due to the alteration in the life cycle, more female family members are employed with higher levels of education. The support of the old in Punjab has declined due to the employment of women, and as a result, the respect, care and responsibility for the elderly has slowly diminished.

5. DISCUSSION AND CONCLUSION

According to the aforementioned studies, there is a strong correlation between it with verbal abuse, economic abuse, disrespect, and neglect of the elderly. The data show that most respondents claimed to financially independent, 11% have a good financial situation from people's rent from residential properties, interest on savings accounts, 8% have some difficulty paying for day-to-day expenses, and the remaining elders have a completely worse financial situation in terms of food, medicine, and people's family burdens. And from the social engagement elders are promoted to spread the knowledge, work as consultants, and offer people's opinions and counsel on practical, moral, and spiritual issues as well as on the attitudes and actions one adopt in life towards others. However, just 11.7% of elders are only inclined to form positive social connections, as opposed to the 76.6% of elders who are only occasionally inclined to act. Growing life expectancy, physical and functional impairments requiring

assistance, generational divides, etc. are some issues endangering the wellness of the elders. Because of the aging process older people are less able to adapt and learn than younger people are, it is the responsibility of the younger generation or people's children to alter how people view the elderly. Additionally, 16.7% of older people are only now becoming aware of people's situation, which encourages to take greater responsibility to maintain the family unit and prevent disintegration. The behaviour shift that shows that more than 83% of the elderly respondents think that the responsibilities of older people are radically changing. Ageing, physical decline, and behavioural changes among family members are the main contributors to this issue.

Old age is a time of suffering and anguish that is unavoidable owing to a number of causes, including declining health, a delicate constitution, lowered immunity, increased risk of morbidity, etc., amid India's demographic transition. Because of how quickly the process is progressing, even elder generations' own children consider like burdens. There are more chronic health issues and functional limits that call for long-term care as the average life expectancy of older persons rises steadily in India. Since the majority of older people in the state live in villages, have low socioeconomic status, and depend on people's families or relatives for both financial and physical support, changing sociocultural contexts and family dynamics, attributes, behaviour are the main causes of the rise in elder abuse. The number of potential carers is reduced as a result of young Indians migrating to urban regions in search of jobs, and the strain on non-migrant family members who take on the responsibility of caring for elderly relatives is increased. The goal of the current study was to evaluate the older adults' social issues, family issues, economic issues, attributes and behavioural changes in the state Punjab. According to the analysis, financial demands are fully met by government pension plans, interest on savings accounts, businesses, occupations, housing rent, and assistance from family members. People who not afford these amenities take care by the age-old homes. In which the lack of acceptance, discrimination, and respect have a significant negative influence on social relationships. It is also true that, modern survival is stressful, particularly for joint or extended families. This causes the family members' characteristics and behaviours to alter. So that the family members view the elders as a financial burden and the family members believed to view the elders as a barrier; as a result, the majority of families are divided into nucleate families. Therefore, given the current situation, it is necessary to deeply assess the elder's well-being by paying particular attention to people's economic, financial, health, housing, behaviour, attributes and emotional requirements.

According to this research, a senior's quality of life is directly correlated with people's financial security, social relationships, personality traits, and family members' behaviours. When it comes to financial aid, it will make it easier for senior people with minimal or no income to pay for people's daily expenses. A political goal to improve the quality of life in old age to ensure that seniors have a minimum amount of financial assets. The percentage of crimes against the elderly whether people are committed by strangers or professionals acting on people's own behalf or by family members, carers, close friends, or even neighbours, is rather high, according to prior studies and the results of our study. The majority of these instances had sons, daughters, and daughters-in-law as the criminals. Youthful participation as well as community involvement is crucial. Indeed, older people themselves reminded of proper procedures and encouraged to take precautions to come up with the mentioned problems. Personal Worth Identity is a social and self-perceived construct that explains how individuals perceive themselves as valuable individuals. It directs an individual's growth through expectations of family roles, chores, beliefs, and behaviours. Therefore, fostering individual virtue will help to reduce elder abuse in both society and the family.

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