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# Old and Alone: Analyzing the Developed and Inherent Social Avenues for Elderly in a Modernizing Society

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*SIT Study Abroad*

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Old and Alone: Analyzing the Developed and Inherent Social Avenues for  
Elderly in a Modernizing Society

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## **Introduction**

Worldwide populations are experiencing dramatic demographic shifts in the number of older? people due to improved medical care and family planning campaigns that have both decreased fertility and increased life expectancy. It is predicted that within the next few decades half the world's population will be over 50 and in developing countries the elderly population will increase four-fold (Adhikari, 2012, 1). Since the aging process is accompanied by the loss of physical and mental abilities due to health-related issues, this shift will create many new challenges for Nepal. Modernization has increased the presence of globalized labor and migration to urban settings, which shifts family dynamics towards the nuclear family structure thus presenting an ambiguous division of caregiving responsibility between the family, the individual, the government, and the community. As these responsibilities encompass financial, medical and social needs, it is impossible for one party to address the entire burden; hence the importance of a network support system that sufficiently addresses these overlapping responsibilities.

As “the most neglected, marginalized and suffered” cohort, elderly are more prone to social isolation due to a variety of social and economic factors influencing Nepalese lifestyle including including changing nature of the nuclear family, patterns of urban migration, and the growing globalization of employment opportunities. Community specific factors including inaccessible infrastructure and early mandatory retirement, coupled with elderly specific factors like a growing dependence on others and their loss of physical or mental abilities heighten the onset of social isolation (Adhikari, 2012, 1).] Isolation is defined as

“distancing of an individual, psychologically or physically, or both, from his or her network of desired or needed relationships with other persons, [...] isolation may be voluntary or involuntary” (Biordi, 2012, pg 85). Social Isolation has been shown to accelerate health-related issues due to increased stress and lack of physical touch and emotional connection. Therefore as a means of managing financial, medical and social side effects of aging, it is important to promote social inclusion and interactions for people of all ages. The goals of this study are to understand the inherent and developed social supports within semi-urban Nepalese society of the Kathmandu Valley; to investigate how modernization has altered traditional values and family structure; and to comprehend social struggles between elderly living alone and with extended family.

### **Literature Review**

Bhattarai (2012) associates the increase of globalized labor market and urban migration into the Kathmandu Valley with an increase in elderly isolation – youth are no longer present to provide the main caregiving responsibilities. Bhattarai argues that “non-family institutions have replaced traditional family support” due to a decrease in job opportunities in rural Nepal, de-emphasis on the patriarchal family and increased access to education (2012). Though these findings are valid, this study fails to address elderly who continue to live within extended family households and thus cannot be generalized to the elderly population as a whole.

Goldstein et al. (1983) addresses the changing familial dynamics through the perspective of urban elderly in Nepal, both living with extended family and

living alone. They challenge the traditional view that equates “membership in an extended family with security and satisfaction for the elderly person” and argue that modernization has not changed the “family/household composition”, but the “realm of relation within the family” (Goldstein, 1983, 717). Considering Chalise (2006) reports that “80% of elderly in Nepal are living with their children”, Goldstein’s conclusions are still applicable. Their research revealed that the traditional Hindu values of respecting elders has eroded into a familial culture in which the elderly must have an independent means of income or ownership of property to incentivize the younger generation to support them. The lack of financial resources in Nepal forces families to choose “between using scarce resources for an unproductive end (their parents will die soon anyway) or for themselves or their children (who will someday get better jobs)” (Goldstien, 1983, 722). Mathema (2012) addresses this trend and reports on the increase of elderly as “victims of domestic violence in the hands of their extended families” in old age and forced to live isolated, poor and homeless lives in the city (Mathema, 2012, 1). In a baseline study of reported cases of elder abuse, “a total of 117 cases of different elder abuse were reported” in two major newspapers over the past two years and of these cases “elders living with families were victimized more often than those living alone” (GCN, 2011). Therefore, the extended family setting is a questionable institution for the well-being of elders.

Mathema and Bhattarai (2012) argue that modernization is to blame for the rise in unsupported elderly, but Goldstein et al. (1983) present the case that the “failure of these supposedly modernizing changes to increase economic vitality of Nepal, rather than the social and political transformations they have wrought, [is]

causing the situation of elderly people to deteriorate” (Goldstein,1983,723). Goldstein and Bhattarai both comment on how the rise of a disposable income within Nepali society has increased the pressure of materialized spending habits, making caring for elderly a financial burden instead of a valued social responsibility. Gautam et al. also noted this burden by presenting financial security as “the strongest correlate of life satisfaction among urban elderly in Nepal” (2008, 190). Yet, what their research failed to notice was how emotional support could also be affected by a lack of financial stability – the more stable the family, the more time and effort can be used to engage in positive emotional support.

Much of what is known about the elderly population of Nepal relates to the barriers within the social and familial structure that promote social isolation. Though this knowledge is crucial for addressing the well-being of Nepali elderly, it is also important to investigate the effectiveness and innovation of current initiatives. Nepal Participatory Action Network (NEPAN) and HelpAge International have worked to implement 22 Older People’s Associations across Nepal with the goal of promoting elderly rights and participation in political and social spheres (Thapa, 2013). Another interesting project was the “Ideal Decedent Award” which has evoked community participation in the caregiving of others by honoring those who honor the elderly (Gautam, 2013). Additionally, Manmohan Memorial Foundation (MMF) has orchestrated a touring program for the elderly with the goal of increasing elders’ visible presence in society and symbolically honoring them at the community level. Though research has been done in other countries critiquing interventions to reduce social isolation in

elderly communities, minimal research has been conducted for projects based in Nepal.

**Research Methodology:**

Qualitative data was extracted via semi-structured interviews, informal conversations, and observational techniques to determine the impact and effectiveness of development projects that support the elderly in Nepal as well as the inherent community establishments. The data was triangulated through interviewing the three main parties involved in supporting elderly's rights: elderly support organizations, caregivers and the elderly themselves. Interviews of elderly support organizations including Old Age Homes (OAH), NEPAN, Ageing Nepal, Sankalpa Nepal, MMF, and National Senior Citizen Foundation (NASCIF).

Various OAHs were visited and semi-structured interviews were conducted with management to understand the advertised social dynamic within OAHs compared to the observed social atmosphere. Interviews also sought to identify reasons for the increased popularity of OAHs in a traditional joint family society and the range of facilities and access to care OAHs' offer. Four different OAHs in the Kathmandu Valley were chosen to represent a sample of the variety of payment and funding sources present in OAHs in Nepal – privately owned, government funded, community based, paying and non-paying. The OAH with the most active observed social atmosphere was used as a four day case study to investigate the daily social lives of the elderly, their family dynamics, their reasons for coming to the home, and whether the home satisfies their social and habitual needs. The residents were observed and interviewed at various times of

the day and on multiple occasions to ensure the accuracy of self-reported information by creating a familiar and trusted social bond between interviewer and interviewee. The multiple day study allowed the observer to recognize the characteristics and social overlap between daycare participants and residents due to facial recognition. The self-reported information of the management and caregivers was then correlated with the responses of residents to understand the differences in perceptions.

Elderly support organizations were interviewed to determine perspectives on how to impact social change within a modernizing society, perceived effectiveness and limitations of various projects, and their self-determined sphere of influence (broader society, media, community-based, or individual). Organizations were selected based on their strong presence and influence in the elderly community in Nepal and the variety of their activities ranging from advocacy, think-tank research, and grassroots catalyst projects. Three particularly strong projects that addressed the social needs of elderly were investigated as case studies to correlate the organization's advertised success with the opinions of the involved parties.

Leaders of NEPAN's OPA in a semi-urban Village Development Committee VDC of the Kathmandu Valley were interviewed to determine whether the association truly provides an effective outlet for elderly to remain active. Individuals who participated in Geriatric Center Nepal's *Ideal Descendent Award*, presented 3 years ago in another semi-urban VDC of the Kathmandu Valley, were interviewed to understand the perceived effects of the award, the regularity of the award, and general knowledge of the award in the village.

Committee members and award winners' names, photos and ward numbers were categorized in the report permitting their use in locating individuals. A focus group meeting was conducted with eight past participants of MMF's *Visit the Nation* program all residing in various VDCs of the Kathmandu Valley to listen to their memories, impressions and attitudes towards their traveling experience.

Local community-based groups that supported the needs of urban elderly, including an active daycare center were observed and informal conversational interviews were conducted to understand daily activities, living situation and the impact of the program on the participants lifestyle. The programs were studied multiple times to gauge normal participation levels and average practices. These programs were run without the support of a recognized NGO and therefore examples of how the community has developed supports for the elderly.

Observational techniques were used to determine the social dynamics of elderly in public settings in the Kathmandu Valley to gather a sense of the inherent community spaces accessible to the elderly. Within casual conversation, elders and caregivers in the multiple study locations were asked about their opinions towards OAHs, their living situation and how they spend their free time to gauge general opinion.

## **Research Results**

### **Semantics of Ageing**

When researching the topic of ageing it important to understand the cultural context and connotation of various words in the Nepali language used to describe elderly and to understanding cultural perception of ageing . The

common term used by NGOs, in government documents and by formal community groups is *jsetha nagarik* which directly translates to senior citizens. This is the most politically correct term and accepted in formal settings. In informal situations, especially within family settings and between spouses, *boudha* (male) or *boudhi* (female) is used as a term of endearment for an elderly person. When used in conjunction, the term *boudhaboudhi* can be used to talk about old people in general, yet is not as politically correct. Lastly, *briddha* also translates to mean old people but has a highly negative connotation in Nepali society due to its association with *briddhashram* which means old age home. Old age homes are still negatively viewed within cultural context because they represent a families' inability to uphold their civic duty to care for their family.

While researching it was noted that different terms were used for people residing in OAHs, these semantics encompass various perceptions towards the homes themselves. Majority of people use the term resident to refer to these individuals, especially management of the homes who would like the home to be perceived as a formal endeavor where people are part of a community. Some homes even used the Nepali word for mother (*aamaa*) and father (*baa*) to develop a sense of family between the residents and staff. One organization used the term inmate to describe the people residing in "barrack-like" homes. This reference to jail terminology, especially when used by an individual highly sensitized to the semantics of ageing, highlights the perceived negative social atmosphere within old age homes in Nepal.

### **Survey of Old Age Homes**

OAHs are a recent addition to Nepalese society within the past 30 years and have been introduced at a growing rate in the past 15 years (Das, 2014). Of the twenty-two OAHs located in the Kathmandu Valley, four were chosen to gather a basic understanding of the levels of care, the social atmosphere, and reasons for the increased influx of individuals living in these settings. Half of the homes were privately funded, while the other half of the homes were community funded. One home was completely free for all residents, two homes had mixed payment systems where the individual’s financial contribution was assessed, and one required payment from all residents; thus, cost of the homes ranged from free to about 27,000 rps per month. All of the homes had huge engravings or posters displaying the list of donors that contributed to their home in any way. There was a wide variety in the number of residences and staff at the different homes, ranging from six to fifty residents and three to twenty-five staff members. All four homes have significantly more female residents than male residents and an age range that extended over 30 years or more. Only one mixed payment home housed a younger individual who was bed-ridden due to paralysis. Half of the homes had criteria that determined who was eligible for admission; criteria included prioritizing those without family or with family tension, those above the age of 60 and those with low socio-economic status. Every home emphasized that there was no discrimination between caste in both the admittance of residents and hiring of staff. Common reasons for coming included family living abroad, family tension, family too busy to care, poor health, neglect and abuse.

Basic Inventory of OAH Characteristics						
Name	Funding Source	Cost (Rps/ Month)	Number of Residents	Number of Staff	Ratio of Residents to Staff	Subjective Social Rating

Home A	Community, Non-paying	0	50	10	5:1	2
Home B	Community, Mixed-paying	0-10,000	35	25	1.4:1	1
Home C	Private, Mixed-paying	0-6,000	6	3	2:1	3
Home D	Private, Paying	27,000	15	15	1:1	4

Health facilities varied drastically between homes. Home D included bi-weekly doctor's visits, weekly body massages and daily hand and leg massages performed with expensive equipment. Home B was collocated in a hospital and therefore had twenty-four hour medical care available. Home A had occasional visits from volunteer doctors. Home D housed many residences with severe health problems included many cases of paralysis. In terms of infrastructure, none of the homes were particularly age-friendly because all had flights of stairs, inaccessible bathrooms, lack of railing support, and doorways inaccessible for wheelchair users. Half of the homes had a program that encouraged college students to pursue medical internships through volunteer work at the home.

The social atmosphere of the various homes also varied drastically along with the social services provided. Three of the four homes only formal social activity was *puja* and mediation. Half the homes had daycare programs in addition to the resident care services – Home D hosted three people in a costly service, while Home B had 130 registered participants in their free daycare program. The larger daycare program included *bhajan*, religious activities and snacks available to both residents and daycare participants. Every home surveyed had residents who were staying with family for the Dashain and Tihar festival season. Half of the homes were designed to encourage residents to sit in

communal spaces in the sun. Three of the houses had communal dining halls and attempted to encourage residents to eat there – though, residences unable to leave their room were feed there instead. Occasionally family visitors came to the homes, but two homes mentioned that many families were embarrassed and/or felt guilty about sending their elders to an OAH. Home A had a small income-generating program for residents to make the candle wicks used for *puja* to sell to help pay for some expenses. The researcher subjectively rated the four homes based on their perceived social atmosphere and available social activities and proceeded to do an in-depth case study at the most active institution (rating of 1 is most active and 4 least active).

**Case Study of Old Age Home B:** The social atmosphere of this home is perceived to be the most active due to its location, interaction with the outside community and dynamics between staff and residents. The home is located behind a hospital therefore has a balance between activity and seclusion. Local children and families spend time at the playground on the property bringing a sense of liveliness to the environment. A large social gathering room is located at the front of the home, connecting the residential space with the outside courtyard. This space hosts two programs that invite neighboring Newari community to participate – a daily daycare program for elderly and a value training program for youth.

The daycare program is a 5 hour program that includes religious readings, *bhajan*, yoga and free refreshments. The program will host special occasions during the festival season that are highly attended – one program observed hosted about 100 people. Once a year, a pilgrimage is arranged to a tourist destination in

Nepal – this program is even available to those in wheelchairs because the hospital owns an accessible vehicle. According to the management, common reasons for attending the daycare program include feelings of loneliness or boredom because family is at work or school, the ability to exchange feelings with other people who will listen and to participate in religious activities. From the manager's experience, residents and daycare participants alike really like the atmosphere here and return again and again. He believes the program offers a great opportunity for old friends to gather and new friends to be made – many daycare participants are locals from the neighboring Newari area therefore have known each other for years. Observation shows that the activities are truly a mix of residents and daycare participants. The manager also noted that over his two year experience, he has seen a lot of physical and emotional changes in residents, especially ones who were psychologically isolated in their families, as they become more socially active – he associates these changes with yoga treatments and the active community vibe.

The human value education program is hosted weekly for youth to inspire character development, sensitize them to elderly issues and encourage core values of trust, love and peace. The observed program hosted 40 youth, who sat separated by gender and forward facing in complete concentration. The program included mediation, a reading of a moral story and an interactive activity. During the program, elderly residents walked through, stopped to watch and continued on their way. According to management, the elderly really enjoy the presence of the youth though this was not evident through their facial expressions and body language.

The management recognizes the importance of family support in the caring of elderly; therefore they offer a counselling service to try and resolve family tension and reintegrate the elderly back into the family -- though it is not always possible to return the resident to their family's home due to other logistical issues. This sense of family is extended into the dynamics between caregivers and residents as residents are addressed by *baa* and *aamaa* (Home B Manager, 2013). According to a caregiver, nurses are supposed to pay attention to everyone and get to know them on a personal level to establish a sense of trust and security within the home (Home B Caregiver, 2013). Playful interactions between caregivers and residents were observed and caregivers were knowledgeable about resident's likes and dislikes, past experiences and family relations. One nurse's past experience working as a caregiver abroad has helped her look differently on the standards of care and social involvement at the home. She seeks to think of new ideas to encourage the residents to be more active and spend less time secluded in their rooms or bored during the day (Home B Caregiver, 2013). Management also recognizes that there are imperfections in the standards of care they provide, aware of the minimal sanitation practices and the lacking social environment but note that the problem is deeply-rooted in Nepali society due to deficiency of government policy implementation and global migration.

Mixed responses were given by residents as to whether they were happy living in the home ranging from empathic appreciation of the home to neutral satisfaction to dislike. When asked about how they spent their free time, many replied with the fact that they could not work and their legs hurt so *ke garne* – more specific answers included watching TV, listening to the radio, reading,

playing cards, writing and cooking. This *ke garne* attitude was a common response towards their satisfaction of the home, their inability to work and family relations.

All of the residents interviewed said that they came to the home because of a combination of the following reasons: their family was living abroad, they did not have family to support them or their family was unable to support them due to other obligations. Family visits were rare or infrequent for most individuals though a couple unique cases existed where family still played an active role through frequent calls, visits, letters, Skype conversations and allowing the resident to live with the family for intermittent extended periods of time. Two residents commented that the social programs did not match their religious or ethnic backgrounds since the program was run in Nepali and practiced Hindu beliefs. One resident also insisted on preparing their own food on a private portable stove because the food was unappealing. As the home had a mixed payment scheme, answers varied on payment strategies but a surprisingly common source of income was through the renting of residential homes.

Outlooks of residents at the home differ drastically, some residents commented on feeling sad because they missed their families and letting this depression consume them while others saw it as their only option and even their duty to their family to stay here. For example, one woman's mother is still alive and living with the resident's family, therefore the family does not have the time to attend to the resident's needs as well. Since she is unable to perform her caregiver responsibilities as the eldest daughter, she sees it as her duty to stay here so her mother can be cared for. She described how she relays her positive outlook to

the sad women whom she rooms with by telling her to pray for her family to have a long and healthy life because it was her duty and if she cried they will not visit.

### **Overview of NGO Perspective**

#### **NEPAN's Older People Association Study**

Over the past decade, NEPAN has orchestrated a series of programs with the purpose of helping senior citizens advocate for their rights. Programs have been funded by multiple foreign organizations, individual donors and minimal support for the national government. Projects have accumulated in a total of 40 VDCs and are funded for short 1-2 year time periods, but each new project builds off the previous work done in the VDC. The series of projects have changed from OPAs to OCMs to the newest 2012 HOPE program – though each is slightly different and improved from the first, the main focus remains the organization of senior citizens for their political and social advocacy. During the OCM program, NEPAN was tasked with giving senior citizens the tools and knowledge to monitor the other senior citizens usage of government social programs including the pension and healthcare services. In coordination with HAI, a continuation of the OCM program was implemented through the 2012 HOPE project which gives money to these older people associations so they can engage in income-generating projects (Thapa, 2013).

A meeting was coordinated through NEPAN with the leaders of a local older people's association in VDC 1 in the Kathmandu Valley. The group was started two years ago through the OCM project and has now continued for the past ten months under the HOPE project title. The leaders commented on their participation in monitoring the healthcare services provided to senior citizens in

their community as well as helping to increase the number of people receiving their social pension. The group includes sixty senior citizens in addition to an all-male leadership board and a younger female accountant. At monthly meetings, individuals are encouraged to pay 50 rps that contributes to making the groups' fund sustainable – individuals unable to pay are still invited to join. At meetings they discuss health, experiences, physical, emotional or social problems and how to spend money. According to the board members, people participate to learn about their rights and to be socially engaged. Only about two members of the group live alone; leaders reported that in the village they are never alone because there a culture of helping and strong community support. The group has a lot of limitations including the lack of an official meeting location – therefore they meet at a local restaurant or the health-post. Their informal daily *bhajan* activity is organized at member's houses or in community places. The project is scheduled to end in March and no one knows if it will continue. The group has future goals of implementing a bee-keeping income-generating project and applying to become a cooperative to increase their financial revenue. NEPAN staff visits the initiative monthly to bring new publications, new ideas and advice.

### **Ageing Nepal/Geriatric Center Nepal's Ideal Descendent Award Study**

Ageing Nepal is a think-tank organization with the goal of orienting people differently towards elderly and the problems they face. Their focus is on encouraging research in the field of geriatrics through partnership with colleges and spreading awareness through radio programs, Facebook, publications and events. The organization's connection within the global ageing arena helps them to inform Nepali society of worldwide actions as means of "bridging the gap

between older people who are better off and older people in Nepal” (Gautam, 2013).

Three years ago, Geriatric Center Nepal, under the leadership of Ageing Nepal’s director Krishna Gautam, implemented a pilot program for an *Ideal Descendent Award* with the goal of changing societal views towards caring for elders and breaking down the barrier of “it’s not your business to come into my home and critique how I treat my family” (Gautam, 2013). A committee was founded in the Setidevi VDC in the Kathmandu Valley in charge of investigating the treatment of elderly within their community. Five of the “best caregivers” were chosen to receive a monetary award in front of high-ranking officials in Kathmandu. According to the report, the community came to the realization that “families treat[ed] their elders with varying degrees of sincerity and concern” and that it was the communities’ to care for their seniors (Gautam, 23). Once the report was written, the organization did not communicate with the community to support the continuation of the award or to offer advice for the implementation of future awards because the committee chair is said to have publicly accepted responsibility for carrying out the implementation of future awards.

All winners and their family members self-reported their excitement, pride and happiness about receiving the award. All reported that they used the award to support their elderly family member by buying medicine, food, repairing their shelter or paying for their death ceremony. Only one winner acknowledged that the award changed his families’ life because the money was used to help his mother recover from her paralysis – the other winners said the award did not change their social status or change their life drastically. It was observed, that all

winner's mother past away immediately after the ceremony three years ago. Four of the winners were visited by committee members before being awarded, while one winner had a family member on the committee who was aware of how he cared for his mother. Three winners said that their neighbors were unaware of the award and one even feared to share the award with neighbors because of jealousy. The two winners residing near the center of the VDC reported that their neighbors were aware of the award.

Committee members all reported that their involvement in the award process was due to their civic engagement history. All agreed that the award's message was positive and ideals were grounded, yet the effectiveness of creating social change was limited by the single occurrence, the ceremony's location outside of the village and disconnect between grassroots level and organizational level. Some of members highlighted how the award provided an incentive for others to treat their elderly well and had the power to change people's mentality, although committee members also reported that only some villagers were aware of the award's occurrence. Members self-reported that they visited a large majority of the elderly living in their ward and took the time to discuss with the elderly about their well-being and lifestyle. The committee is still active but is unable to accomplish many of its goals, including implementing another award, due to lack of funding.

**Manmohan Memorial Foundation's Visit the Nation Study**

Five years ago, the Manmohan Memorial Foundation began the *Visit the Nation* program which funds over one hundred elderly from multiple districts in Nepal to enjoy a nine day tour to some of the nation's most treasured sights. The trip is entirely free for all participants, including transportation, food and lodging. One male and one female are chosen each year from twenty-five VDCs and from the Districts included on the tour. Individuals are nominated through MMF district branches, OPAs and women's organizations. Criteria for nomination includes being over the age of 60, in good health, ability to walk for short distances and a good image within the community (i.e. no criminal record) – priority is given to those over the age of 65, those neglected or living alone, and those who can't afford to travel.

The group travels to famous historical, religious and natural sights including Lumbini, Palpa, and Pokhara as well as local soap, noodle and biscuit factories to understand how their everyday items are produced. In every location, the elders are welcomed with banners to announce their arrival to the community. The program includes a variety of cultural musical events, a candlelight procession through the streets of Pokhara (followed by the bus so that all individuals are included) and a farewell program in Kathmandu with important community members in attendance. Before the program, staff visits each location multiple times to ensure the security and accessibility of hotels, restaurants and other sites. The program is funded through individual donations by encouraging people to sponsor an elderly.

A focus group discussion with eight past participants, all residing in the Kathmandu Valley, was organized to gather impressions and personal experiences

from the trip. Not a single individual could say anything bad about the program; every person was full of smiles and compliments – common compliments included the ease of accessibility, excellent management and the high quality food and lodging. Common impressions included pride and excitement to honor their nation, enjoyment of visiting locations they had never seen due to lack of money and resources, and gratefulness towards staff. Some participants responded that if they had the chance to do it all over again, they would do so in an instance. One man had even typed a personal memoir about his experience. Another man said that after this experience, he believes strongly in what MMF is doing and thinks that all donations should come here. All also agreed that they did not feel respected by the younger generation and it was important to reinvigorate this respect in their culture.

### **Community-Based Structures**

#### **Daycare Center Case Study**

The local community-supported daycare center offers a weekly two to three hour program for elderly that includes a public speaker, religious activities, yoga, health check-ups and snacks. The lecturer focuses on a variety of topics relevant to elderly including health practices, memory-training and information on available government social programs. The program requires a 1,000 rps registration fee, although it can be waived for individuals unable to pay. The group is run by a board of community members, many whom are also retired and over the age of sixty. Every program begins by introducing the donor who donated the snacks or in some cases who donated a large amount for the sustainability of the program – large donors are recognized on wall-hangings.

Before the program, participants have the chance to sit in the sun, chat amongst themselves and read the newspaper. All participants live within walking distance to the center and according to a volunteer about 80% are middle class and 20% lower class. Based on observed facial expressions and body language, majority of individuals seemed happy and content to be here. During the lecture, some seem interested while others are bored or sleeping. The excitement level rises again once snacks are served. Average number of participants present during the festival and election season (notorious low season) was 25, although attendance peaked to 40 during the *bhajan* session. During a particularly low attendance day, the meeting flowed more informally with discussion about peoples' past experiences and introductions of new participants.

Informal conversations with participants revealed that an overwhelming majority lived with family members and only one woman said she lived alone with the help of care-givers. Over half of the participants had family members working or studying abroad and they remained in contact with these individuals through phone calls and Skype. Common reasons for attending the program were boredom at home due to family at school or work, need for social interaction, recommended by friends, and enjoyed gathering with friends from the community. Many thought the program was a good idea because it was regularly scheduled, free and fun. Many individuals did not participate in other formalized social activities but spent time taking care of grandchildren, going for walks if able, reading, listening to the radio and one participant engaged in a small income-generating venture making candle wicks. Another common response to

how free time was spent was that the participant was unable to work and unable to walk very well so *ke garne*.

### **Inherent Social Dynamics in Public Spheres**

Throughout the research period, elderly's social habits in public spheres were constantly observed to gather a subjective understanding of how the community inherently supports elders. It was found that elderly mainly use store fronts and outcroppings in buildings as public gathering spaces. Store fronts are mainly used for casual conversation over cups of tea while architectural outcroppings are used for a variety of activities including participating in religious gathering or *bhajan*, doing small jobs like tailoring or selling produce, playing cards or chess, or just sitting watching the city go by. Elderly are highly present during the morning hours before the mid-day lunch and in the late afternoons. Public gatherings tend to be divided by gender and age, although mixed age settings occur the elderly look to be on the outside of the activity or conversation instead of active participants.

### **Discussion**

#### **Survey of Old Age Homes**

Given the perceived social atmosphere of four different OAHs it is evident that focus on social needs is undermined by the struggle to perform basic healthcare services. It was seen that as price increases health care levels increase but social activities did not, the most expensive home lacked an active vibe although this could be attributed to the majority of residents have severe immobility and other health problems. Homes C and D both were perceived to be business driven rather than focusing on the social and emotional needs of the

individual. Factors that increased the social atmosphere at Home B were its engagement with the outside community, building layout and location, and dynamics between residents and staff.

The home hosted an active all-year round daycare program and a weekly value education class for youth. These programs offer residents a chance to interact with people outside the home, participate in religious social activities or at minimum benefit from proximity to the excitement. The program is not perfect and still lacks participation from many of the in-home residents, which could be due to indirect discrimination of non-majority religious or ethnic practices; therefore further innovation is needed to satisfy the social needs of residents. The location of the home also promotes a balance between peaceful seclusion and community activity as neighboring youth and families receive services from the hospital and play on the playground in the compound. Staff attempts to create a sense of family within the home through the use of *baa* and *aamaa*, although this is not enough to replace the lack of family support it is a step in the right direction. Management is clearly updated and aware of the importance of fulfilling social needs to fight the isolation, whether innovative action towards this goal is continuously pursued is beyond the scope of this paper. Management also believes even by paying a little bit, residents feel more dignity and ownership about their care and feel they deserve and have the right to ask for a certain state of care – though the cost of care may be higher than need be for the quality of care received, increased dignity and ownership have been seen to be positive in the well-being of elderly (Home B Management, 2013)

The general consensus of opinions on OAHs gathered over the course of this study was that unfortunately the homes are now needed to support the needs of neglected and lonely old people, although living with joint family is still preferred because it provides more love and care. Many members of the younger generation self-reported that they still feel their civic duty to care for their parents which is evident by the 80% of old people still living with children (Chalise, 2006, 202). The rise of the middle-class and the globalized job market has created an influx of migration to America, UK, and Australia. The younger generation develops a westernized sense of independence and individuality which deters them from reintegrating back into Nepali culture. This generation still wants to care for their families and paying old homes seem the only feasible option (Das, 2013). This traditional Western “stupidity” is unsustainable globally due to population ageing and in Nepal due to the lack of infrastructure; “modernity is pushing us towards treating our old people more like cattle” thus alternatives must be found (Gautam, 2013).

### **Overview of NGO Perspective**

NGOs working in the field of gerontology in Nepal participate in a variety of common practices to enact social change in different spheres of influence. On the individual and community level, awards are sanctioned to incentivize positive work in the field, festivities are orchestrated to celebrate global senior citizens’ awareness days and old people are mobilized in communal forums. On the broader social level, trainings and workshops are held to develop a more knowledgeable caregiving sector, awards are sanctioned to encourage

prolific media publications about elderly issues, and research projects are developed to increase the lack of data in field. Interviews with multiple organizations have revealed the amount of cooperation and partnership within this sector due to the formation a National Senior Citizens Federation and passionate like-minded people.

OPAs were implemented with the goal of mobilizing senior citizens to fight for their rights through active ageing practices, yet the program has created a social outlet to enhance the inherent sense of community in the semi-urban VDC. By encouraging senior citizens to be in charge of monitoring the health and social rights of peers, the network of support within the community has expanded outside of the family. The association itself provides a forum to discuss emotional problems in addition to the main focus of political advocacy. The success of the political advocacy is unknown, but it is evident by the passion and excitement of the leadership that the OPA has boosted their confidence and helped them remain active community members. The VDC is close enough to the city that the working generation can commute back and forth; therefore it is uncommon for elderly in this VDC to be living alone. But, these people still face the post-retirement boredom so the OPA plays an important role in helping them regain a sense of purpose. Sustainability of the group without the support of NEPAN is questionable, but the informal daily *bhajan* is something that is truly their own prerogative and shows their commitment to the group's formation. It is encouraging to see the connection between grassroots level and organizational level through NEPAN staff's regular involvement in the solidification of the association, though this constant supervision has the potential to create a

dependence relationship. The associations' strong focus on increased their revenue is intriguing and questions whether this focus is culturally influenced by the popularity of cooperatives or influenced by NEPAN Western funding base. Nevertheless, the OPA offers a regular social outlet and helps balance the pressures of caregiving between the community, peers and family members.

The *Ideal Descendent Award*, categorized as a "Social Innovation" in the report, seemed to mobilize the community to play an active role in the caregiving process yet further research shows pitfalls to its overall effectiveness. It was unanimously agreed that the award's intentions were strong and overall effect positive, but discrepancies lay between the reported community mentality and the actual village dynamics. The report suggested that the award incentivized other community members to take care of their family members better, but interviews show that only some neighbors and friends were aware of the award's existence – majority of the knowledge of the award existed near the VDC center and social service building. Participants recommended that if the ceremony had been located in the village instead of in Kathmandu, then the increased visibility of the award could have made a more effective social movement. The single occurrence of the award, apparently due to lack of funding in the VDC, did not reinforce the incentive and therefore weaken its strength. For future awards, it is important to acknowledge a Dalit winner's fear of jealousy that limited her from sharing about the award. Though many responded that the award's money was not enough to completing change the life situation, it was not used in vain – every winner used the money for the betterment of the well-being of their elder family member. The pride of the award definitely helped boost people's confidence and encouraged

them to continue their good work. The committee started for the award is still in place and continuing to work although is crippled but lack of funds. Research showed a clear disconnect and miscommunication between the grassroots participation and piloting organization – the committee members felt financial abandoned and lack of interest from the Kathmandu center while the leaders in the Kathmandu center were under the impression that it was irritating and humiliating to continue checking up on the VDC's promised commitment to self-officiate the award. The award has clear potential to fight to curb cases of elder abuse by breaking the “social taboo in Nepal for an outside to look into the interpersonal relationships within a family” as long as efforts are made to keep the award recognition local, to increase regularity of presentation and to minimize miscommunications between parties (GCN, 2011,27).

The *Visit the Nation* program enacts change on both the community and individual level. While sitting in the room with past participants, it was evident that the tour had made a lastly effect on these senior citizens; the excitement level grew with each memory shared. The program acts as a symbolic gesture that shows elderly that they are respected by the nation and shows the community that elder people are important and need to be loved and cared for. The welcome banners and candlelight procession increase the visibility of older people in the community and act as positive public awareness campaign – other campaigns focus on increase knowledge about elder abuse, while this highlights the celebration of old age. The visited community are also ask to provide support for the group through lodging, tours, of funding meals therefore the program becomes a joint effort. Whether or not the mindset of the community is changed by this

program is outside the limits of this study, but it is clear that mindsets of the participants are uplifted and reenergized by the experience.

### **Inherent Community Structures**

Due to the increased of women in the labor force as a result of societal changes and financial pressure, elderly living in joint families have become lonely and bored during the hours at which their family is a work or school. Therefore the community-based daycare program provides a support system for elderly to remain active while still living in the joint family system – the family and the community double as care-givers to balance the load. The program itself is structured very formally in terms of presentation, which is perceived to be done so as a means of appearing legitimate, yet also develops a sense of purpose and ownership within the participants. Lectures give participants an opportunity to learn about social rights and healthcare; whether or not they are truly engaged in the lecture is questionable, considering many are dozing off, but yet they continue to come. Therefore, the social value may outweigh, but not undermine, the educational value. The communal meeting center provides a forum for elderly to voice emotional struggles, share experiences or even just to be surrounded by other voices. The community setting means that participants are more likely to know each other, especially if they have lived there for a long period of time, thus could be potentially more comfortable sharing intimate problems. The regularity of the program allows participants to easily incorporate it as part of their schedule but at the same time a change of pace from the normal home lifestyle.

Elderly have opportunities to be visible in public spheres; whether this visibility equates to activeness is unclear. In many cases, elderly were found to be passive observers of their social surroundings; it is thought that this involvement, although not ideal, is better than remaining alone in a private. Limitations to this visibility exist due to inaccessible infrastructure, but Nepalese people are perceived to have a sense of resilience and normality towards this lifestyle – as one caregiver said “ Nepali people may not have a lot, but they will always have a smile” (Home B Caregiver, 2013). Although the roads, bus system and building designs are not age-friendly, this does not seem to provide as isolating a barrier as expected – note, drastic changes need to be made to create a more age-friendly environment to promote increased inclusion. Along with this adapted resilience, the *ke garne* attitude is observed to help maintain a peace of mind towards less than ideal situations – this attitude also carries the negative side effect of passivity towards enacting change. Majority of social activities performed in the public sphere are also divided by age and gender therefore limiting the possibility and acceptance of intergenerational activities. Additionally, drinking tea is a main source of social interaction for all ages in Nepali society, in both private and public spheres, and therefore is used by elderly as an important means of promoting community.

Compared to that of the Western world, time seems less compact in Nepali culture, which could potentially mean that Nepalese are more comfortable actively participating in less. But due to the subjective definition of boredom and fulfilled social engagement it is impossible to generalize the needed level of

engagement for all. This must be taken into account when developing social outlets for elderly.

### **Conclusion**

Commonalities were found between preferences of old people in Nepal whether they were living in an OAH, living with family or attending a community daycare program. Religion was found to be a core focus of people's lives and both developed and inherent activities that complimented this focus were found to be most attended – “old people are more conservative and very religious therefore a lot of social activities focus around religion” (Home B Management, 2013).

*Bhajan* was found to be the most popular form of activity because it incorporated devotional needs with active participation. The Hindu and Buddhists mantras were evident in many responses towards non-ideal situations, thus acting as a spiritual coping mechanism. Therefore regular religious behavior serves as a time-pass, social outlet and peace of mind for many elderly.

Food was found to be an underlying social magnet in both developed and inherent social arenas. At every organized function or meeting anxiousness and excitement peaked when food was served. In inherent public and private spheres, tea is served to a guest whether they want it or not, thus promoting interaction between parties. In one case in an OAH, the preparation of food was used as a means of maintaining control and normality – control of ones' live is typically lost in the OAH setting, therefore the simple task of preparing tea has inherent value.

Elderly were observed and reported to be involved in income-generating activities in multiple research situations; income sources included selling of produce or candle wicks, renting of homes and bee-keeping. Goldstein et al. (1983) comments on how elderly are being forced to develop their own means of income as their families become less supportive. Whether financial situation is dire or not, these activities give elderly a purposeful role to pass time and as a means of incentivizing respect from their families; as one interviewee said that “family members respected those who work” (OPA Leader, 2013). Research in the lives of middle-class urban elderly has shown that once basic needs are met there is a lack of provisions to meet the social needs of these individuals. Poor families do not have the luxury of boredom because they must remain active to sustain the livelihood for the family, while middle-class elderly are now facing boredom due to the separate of generational lifestyles.

Multiple social organizations, including OAHs and community daycare program, strongly advertise donor support as means of encouraging others to follow suit. Yet, this may also create unwanted dynamics within the community – members unable to donate may feel pressured to do and be deterred from participating. Both the OPA and community daycare required a participation fee, but said it could be waived for those unable to pay. This scheme does not take into account the embarrassment potentially associated with not being able to pay and therefore could be excluding and alienating members of the community.

Many reports published about developing sustainable practices to adapt to population ageing include expanding to use the knowledge and skills of elderly for productive means. The forced early retirement in Nepal, leaves many active

middle-class individuals between the ages of 50-60 with no vocational obligations. Research found that a number of these individuals have become participants in social work and civic engagement. In this way, active senior citizens remain active with a strong sense of purpose while working for the betterment of their less active or less able peers. This is a promising trend that should be encouraged as means of addressing isolation, loneliness and lack of life purpose in the ageing community.

Another long-term perspective that is being actively pursued by every organization interviewed was the mindset of the younger generation. Various groups organized scholarships to promote geriatric education, internships to encourage work in geriatric nursing, and educational trainings to sensitize youth to the needs of the elderly. The focus on changing cultural mindsets is a forward thinking attitude that can promote sustainable alternatives to population ageing. Margaret Perkinson (2013) reminds us of the importance of being “cautious that our Westernized, medicalized models of gerontology and geriatric education are not transferred intact on the global level” as the field is in its formative stages in Nepal (Perkinson, 2013, 88) – currently only one hospital has a geriatric ward and gerontology is not available in higher education (Bahadur, 2013).

Nepal is currently following in the footsteps of the Western world by trying to develop a system of OAHs to adjust to the nuclear family structure and globalized labor market. Nepal’s lack of in structure to support the growing need for OAHs places with an intriguing social opportunity. Nepal is in a viable position to stray from the norms and enact more innovative solutions that create a networked care system between the community, families and individuals. Elderly

support organizations are on the right track as they attempt to seek long term solutions that engage senior citizens in civic work, incentivize the community and younger generation to remain active in the caregiving process, and increase awareness of elderly issues in the public sphere.

## **Glossary of Terms:**

NGO – Non-Government Organization  
INGO – International Non-Government Organization  
OAH – Old Age Home  
OPA – Old Persons Association (NEPAN)  
OCM – Older Citizen’s Monitoring Program (NEPAN)  
NEPAN – Nepal Participatory Action Network  
MMF – Manmohan Memorial Foundation  
NASCIF – National Senior Citizen Federation  
HAI – HelpAge International  
KTM – Kathmandu  
VDC – Village District Committee  
HOPE Program – Helping Older People Program (HAI/NEPAN)

*Jsetha nagarik* – Senior Citizens  
*Boudhaboudhi* – Old People  
*Briddashram* – Old People Home  
*Bridda* – Old People  
*Baa* – Father  
*Aamaa* – Mother  
*Bhajan* – Devotional Song  
*Puja* – Hindu daily offering/prayer ritual  
*Ke garne* – What to do

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## **List of Interviewees:**

Committee Member 1, *Ideal Descendent Award*, November 21, Setidevi, Kathmandu Valley

Committee Member 2, *Ideal Descendent Award*, November 21, Setidevi, Kathmandu Valley

Committee Member 3, *Ideal Descendent Award*, November 22, Setidevi, Kathmandu Valley

Committee Member 4, *Ideal Descendent Award*, November 23, Setidevi, Kathmandu Valley

Committee Member 5, *Ideal Descendent Award*, November 23, Setidevi, Kathmandu Valley

Committee Member 6, *Ideal Descendent Award*, November 23, Setidevi, Kathmandu Valley

Committee Member 7, *Ideal Descendent Award*, November 23, Setidevi, Kathmandu Valley

Committee Member 8, *Ideal Descendent Award*, November 23, Setidevi, Kathmandu Valley

Caregiver, November 16, 2013, Old Age Home B, Kathmandu Valley

Dr. Gouri Shankar Lal Das, President, November 28, 2013, NASCIF, Dillibazaar

Fatik Thapa, Executive Director, October 8, 2013, Nepal Participatory Action Network, Kupondole, Kathmandu

Govinda Gajurel, Executive Director, November 12, 2013, Manmohan Memorial Foundation, Singha Durbar, Kathmandu

Hari Timsina, Programme Coordinator, November 7, 2013, Sankalpa Nepal, Subidhanagar, Kathmandu

Krishna Murari Gautam, Founder Chairperson, October 2, 2013, Ageing Nepal. Ramachandra Marga, Battisputali, Kathmandu

Manager, November 6, 2013, Old Age Home A, Kathmandu Valley

Manager, November 6, 2013, Old Age Home B, Kathmandu Valley

Manager, November 6, 2013, Old Age Home C, Kathmandu Valley

Manager, November 6, 2013, Old Age Home D, Kathmandu Valley

Participants, November 13, November 20, November 27, 2013, Daycare Center, Kathmandu

Residents, November 15-18, 2013, Old Age Home B, Kathmandu Valley

Focus Group, Past *Visit the Nation* Participants, November 28, 2013, Sanepa, Kathmandu

Focus Group, Leaders of OPA, November 28, 2013, VDC 1, Kathmandu Valley

Winner 1 of *Ideal Descendent Award*, November 21, 2013, Setidevi, Kathmandu Valley

Winner 2 of *Ideal Descendent Award*, November 21, 2013, Setidevi, Kathmandu Valley

Winner 3 of *Ideal Descendent Award*, November 22, 2013, Setidevi, Kathmandu Valley

Winner 4 of *Ideal Descendent Award*, November 23, 2013, Setidevi, Kathmandu Valley

Winner 5 of *Ideal Descendent Award*, November 23, 2013, Setidevi, Kathmandu Valley