Journal of Indian Studies Vol. 5, No. 1, January – June, 2019, pp. 77–90

# Modernization and Status of the Aged People in South Asia: A Mixed Methods Investigation from Pakistan

Arfan Latif Higher Education Department. Punjab, Pakistan. Shoukat Ali University of the Punjab, Lahore, Pakistan. Zubaida Zafar University of the Punjab, Lahore, Pakistan.

#### ABSTRACT

Status of the aged people is one of the most important areas of social sciences. Aged people constitute a vivid proportion of the population in the developed countries and this population is on increase in the developing countries. It has been observed that modernization has changed and declined the status of the aged people. The current study uses Cowgill and Holmes theory of modernization to determine the status of the aged people by using mixed methods approach. The study is based on 12 in-depth interviews and 150 questionnaires from aged people. It was concluded that modernization has altered the status of the aged people but qualitative study has established that aged people in Pakistan enjoy good social, physical, political and economic status. The primary reason behind this difference of conclusion is mainly due to the fact that modernization is under process in Pakistan and people still enjoy higher level of status.

# Key Words: Aging and aged, Status, Pakistan, Modernization Theory, Mixed Methods

#### Introduction

Anthropological research on aging was very limited prior to 1970s. But later on, in the recent decades, the topic of ageing has become very important both for anthropologists and sociologists because ageism has become an important social concept. The numbers of the aged are increasing day by day. In future, there would be a large pool of the older people that may create many social and political problems (Clark, 1967). The concept of "Ageing" became very important with the research of Cowgill and Holmes. They focused on the aged people and related them with the advancement of technology. According to them, the status of the aged was much affected with technological advancement (Cowgill and Holmes 1972).

Ageing is an emerging social concept which has many social, political, economic, and biological challenges for the modern world. In the primitive societies, the aged people used to enjoy their status in all fields of the life. They were considered the superior in almost all societies. But with the advancement of

technology, the aged people lost their status. The modern technology transformed the society from traditional to most advanced societies. Now policies are being formed to tackle the new phenomenon of ageism. In the developed countries, the old homes have been constructed to take care of those (Arnold Cathalifaud et al, 2008). The islands of American Samoa experienced a great deal of changes in the traditional status of the aged. The status of the aged was changed due to the process of modernization. A field research was conducted in this island to investigate the concerning topic of ageism and modernization. It was concluded that the status of the aged was deteriorated due to modernization (Keesing 1934 & Mead, 1928).

Modernization is a complete transformation of a traditional society to an advanced society. All the modes of life have changed with the arrival of modernization. It diminishes the role of a limited and simple society. It transforms a simple society into more complicated and complex one. It creates division of labor and different institutes to perform a particular task for a specific matter. It is based on highly advanced, bureaucratic and systematic form that is totally opposite to a traditional society where all powers have been under the directions of the aged people (Cowgill, 1974). In Ireland, approximately 11% of people about 467,926 are above the age of 65. The numbers of people have increased by 54, 00 since the late 1990s. It is estimated that  $\frac{1}{4}$  of the Irish people would be old by 2030. The predictions suggest that between now and 2050, the numbers of older people would rise up to triple of the current numbering and that would be 1, 435, 000 (Department of Health and Children (DoHC), 2007). By reaching 2050 Japan will have 36.4% of aged people that is a large number. This trend is also seen in most of the other countries as well. Population ageing is a major problem for the world now. Aged people constitute a large part of the world population and they have their own problems and misconceptions in the mind of the people regarding their roles and status in the society.

Fernmia et al. (2008) reported while using a small sample of U.S. children that approximately 75% of 8-9 years old children had either positive or neutral views about the aged. It was because the children were closer to these older persons than the other family members. Focusing on the nursing and medical students that the older people had positive tendency from their families (Yen et al., 2009). There were many stereotypes attached to the older people. Most of these were negatively attached to them. For example, aged people had weak body, low eye-sight, and weak physical and mental health. They could neither walk nor talk smoothly (Palmore, 1999). Most of the researchers explained that the aged were mostly termed as ill-health and weak physical characteristics. It is not applied to all older people because there are many old people who have very sound mind and active physical and mental characteristics. All of the aged cannot be termed as poor in physical and mental appearance (Musaiger & D'Souza, 2009). In a study most of these children (58%) answered that the aged die and (36%) of them said they get prey of different diseases. It showed that almost all of the respondents exposed negative realities about the aged people (Hall & Batey, 2008).

### **Defining the older person**

Most of the developed countries have generally accepted the chronological age of 65years as the definition of an "Older Person" (WHO, 2009). In addition to chronological age, the age of the person can be defined in many ways, dealing biological, psychological and socio-cultural process (Cohen, 2002). The requirement of the age of an older person varies from time to time. In the early nineteenth century, the old age was considered to start at 40 years, while in the last decades, 65 years of age had been fixed for an older person (McConatha et al, 2004).

#### Issues of aged population in South Asia

South Asian countries constitute an important region of the world as it forms 1/5<sup>th</sup> population of the entire world. In addition to that the presence of powers such as China, India and Pakistan reinforce the importance of this region. The issue of aged population is sever in the developing countries than in the developed countries and in South Asian countries like Pakistan and India often confront problems related to aged people and their status in this modern world. The ever increasing rate of population and increasing population of the aged along with poverty make this population more vulnerable to multiple issues (Ha et al., 2002).

The aged population in Pakistan faces wide range of health issues and according to the census of 1998 the aged population of Pakistan has 28% of the disability ratio which is quite high. In addition to that physical ailment, high blood pressure and psychological issues undermine the status of the aged people in Pakistan (Zafar et al, 2006). Low family income and poverty further weakens the health status of the aged people in Pakistan. Most of the family income is used for the purpose of maintaining health in Pakistan which is quite high considering the low per capita income of the country. This worsen the economic and health status of the aged people (Fatimi & Avan, 2002). However, constitution of the Pakistan along with other policies have ensured many rights to the population of the aged but despite that it is not up to the mark and equaling the issues encounteried by the aged population (Azhar et al, 2010).

In India the issue of the aged people is also very high as they confront many issues related to the health and economic wellbeing. There are some cultural misconceptions involved regarding the status of the aged people. In India caste, religion and business are the key indicators of determining the status of the aged people (Sonalde, 2010). Similarly, the ageing itself is an issue as the age progresses the health issues worsen. In India the ever increasing health issues of the aged population are related to lack of economic resources, social aloofness and poor diet. In the same manner lack of attention by the family members also hurts the nature of the status of the aged people (Rao et al, 2003).

However, aged population is being provided with some facilities by the government to soothe their ageing. In developed countries aged population is enjoying a good amount of resources and facilities and developing countries are also paying attention to increase the trend of facilitating the aged people. In South Asian states such as Bhutan, Nepal and Bangladesh following important steps have been taken to facilitate the aged population.

- Aged population is provided with discount in their traveling in airlines, buses and railways.
- South Asian states have developed national policy for the welfare of the aged population.
- Concession on income tax for the aged population is also an important step.

# Theoretical foundation of the status

Modernization theory mainly explains how aged status is determined and affected by modernization. Cowgill and Holmes developed this theory in 1972. This theory explains how health technology, economic and industrial technology, urbanization and education have influenced the status of the aged people. According to this theory modernization has decreased the status of the elderly people. Previously, aged people have been enjoying higher level of status and most of the power in the family and society but with the passage of time and emergence of the modernization this trend has declined and now aged enjoy a lower level of status.

# Health technology

The application of health technology-including public health measures, nutrition, and all aspects of curative and surgical medicine-dramatically affect the structure of society so that there is an ageing of population. This comes about through a prolongation of adult life as well as a decline in the birth rate. The theory argues that within the context of an industrialized society with emphasis on youth and new occupations, the extensions of the adult life leads to the intergenerational competition for jobs. Therefore older people are forced out of the labor market. They retire because they are denied participation in the work ethic. The elderly experience reductions in monetary income, prestige, and honor thus decrement in status.

# **Economic Technology**

The application of economic and industrial technology leads to new occupations located increasingly in an urban setting. Geographically and socially mobile youth migrate to these jobs. Older people are left in positions that are less prestigious and often obsolete. The lack of the opportunities for retraining (especially in rural areas) leads to early retirement. This retirement, accompanied by loss of income,

may also bring a reversal of traditional family and community roles. Formerly, the young were dependent on the old; now older suffer dependency.

# Urbanization

Urbanization, including the separation of work from home and geographical separation of youthful urban migrants from their parental homes, profoundly changes the nature of intergenerational relations. With the process of modernization, the phenomenon of urbanization takes place. Due to urbanization, the young people move to the cities in order to get good jobs. The family bounds could not maintain its effect on the young stars. The old people are segregated and their status decreases.

# Education

The promotion of literacy and education (almost always targeted at the young in modernization efforts) generates a situation in which children are more literate and have greater skills than their parents do have. This imbalance has the effect of inverting roles in the traditional society: the young generation has higher status than their parents', and children occupy positions in the community formerly held by their parents. The increasing social change brought by that modernization widens the gap between the generations, thus causing an intellectual and moral separation or segregation of the generations. Youth comes to symbolize progress, and the society directs its resources toward the young and away from the old, accentuating the decline in status of the aged.

# **Research design**

The current study uses the mixed methods approach to find out the relationship between modernization and status of the aged people. Use of mixed methods approach enhances the validity of the research by mixing the findings of the both quantitative and qualitative data (Tashakkori & Teddlie 2000). As the current study is multidimensional and requires both types of data to be collected. For the purpose of qualitative data the researchers conducted in-depth interviews from aged people. Similarly, for quantitative study the researchers adopted a cross sectional survey method. Following is the detail of data for the current study.

# Quantitative study

The objective of the quantitative phase of the study was to see the association between modernization and status of the aged people. As the respondents for the current study were aged people who had been retired or disengaged from the sphere of practical life. There was no sampling frame to identify the respondents

for the current study. However, the researchers conveniently identified the old age homes in the city of Lahore. The researchers further decided to collect data from population of both genders. Furthermore, the respondents should be retired from any government job and time after retirement should be more than three years. The sample size of the quantitative part was 150 (75 from both male and female respondents).

### Qualitative study

The objective of the qualitative phase of the study was to understand in-depth the status of the aged people by covering all four dimensions of the status. As the topic of the current study is focused and directed towards measuring a particular topic. Hence, purposive sampling technique was adopted for the purpose of qualitative study. According to Neuman, purposive sampling is appropriate in three situations. "First, a researcher uses it to select unique cases that are especially informative". "Second, a researcher may use purposive sampling to select members of a difficult-to-reach, specialized population". "Third, another situation for purposive sampling occurs when a researcher wants to identify particular types of cases for in-depth investigation." (Neuman; 2006). So, for the collection of the qualitative data purposive sampling was most appropriate to gain in-depth understanding of the topic. The qualitative sample was consisted of 20 respondents 10 each from male and female).

#### Tool for data collection

There were mainly two tools for the collection of data. For the purpose of qualitative data in-depth interviews were conducted and for that purpose interview guide was conducted. "An interview guide is a list of questions or issues that are to be explored in the course of an interview. An interview guide is prepared in order to make sure that basically the same information is obtained from a number of people by covering the same material."

So it is clear that if you are interested in understanding the feelings and reactions of someone about a topic the researchers have to conduct the in depth interviews. As in present case the researchers were interested in understanding the social, psychological, economic and physical status of the aged people so they had to conduct the interview guide or the in depth interview. Similarly, for quantitative study a questionnaire was constructed to measure the relationship between modernization and status of the aged people. The questionnaire had two main parts the first part of the tool related to the questions pertaining to the measurement of independent variable while second part related to measuring the dependent variable.

# Data analysis

The quantitative data were analyzed by using Statistical Package for Social Sciences (SPSS) latest version. 150 respondents, data was entered in SPSS and was analyzed. For quantitative analysis cross tabulation were used. Both descriptive and inferential statistics were used for this study. And to test the hypothesis of the study chai square test was used.

The best-suited method of analysis for this research was domain analysis. The Domain in this research was Status. The subtypes or the included terms in the research at hand were Social, Psychological, Economic and Physical status. The researchers first identified the broader themes in the data and then they compared different themes with one another and reached at the broader interpretation of the cultural setting.

# **Descriptive statistics**

Following table shows the frequency and different demographic characteristics of the respondents. The researchers tried to include population consisted of both the genders and respondents from different qualification levels and different spheres of practical life. This enabled the researchers to have a clearer and more comprehensive picture of how modernization had affected the status of the aged people.

Respondents	Category	Frequency	Percentage	
Gender	Male	75	50%	
	Female	75	50%	
Qualification	Category	Frequency	Percentage	
	Master and above	62	41.3%	
	BA/BSC	65	43.3%	
	FA/FSC	23	15.4%	
Profession				
	Agriculture	50	33.33%	
	Private business	15	10%	
	Government servant	60	40%	
	Private job	25	16.66%	

Following table No.01 shows the Descriptive statistics of the study.

# Modernization and status of the aged

According to Cowgill and Holmes there are four primary indicators of modernization that affect the status of the aged people. Following table shows that how all four aspects and indicators influence the status of the aged people.

Following Table No.02 shows the relationship between modernization and status of the aged people.

Health technologies and	status of the ag	ged		
Very greatly	Greatly	To some extent	Not at All	Total
63	34	33	20	150
42%	22.66%	22%	13.33%	100%
Economic technology and	l status of the	aged people		
80	21	26	23	150
53.33%	14%	17.33%	15.33%	100%
Urbanization and status	of the aged			
44	35	53	18	150
29.33%	23.33%	35.33%	12%	100%
Education and status of t	he aged			
55	33	37	25	150
36.66%	22%	24.66%	16.66%	100%

#### Table No 02. Modernization and Status of the Aged People

The above table shows the percentages of response categories of how health technologies, economic technology, urbanization and education have declined the status of the aged people. The table shows that 42% of the respondents show that increase in health technologies decrease the status of the aged. Only 20 respondents (13.33%) are of the view that health technology is not responsible for change in the status of the aged people. However, 130 respondents (86.66%) of the total respondents attributed the decline of the status of the aged is due to increase in the health facilities.

When it comes to see how economic technology has affected the status of the aged people the responses show that only 23 respondents are of the view that there is no relationship between economy and status of the aged people and 53.33% of the respondents say there is a strong correlation between the both. Overall, 84.66% of the respondents show that increase in economic technologies and industrialization have resulted in decrease of the status of the aged people. Urbanization is showing some mingling trend regarding status of the aged people. 52.66% of the respondents said "very greatly" and "greatly" regarding urbanization and status of the aged people. 18 respondents showed no relationship between urbanization and status of the aged people.

Education is an important indicator of modernization and 85.33% of the respondents attribute it with the decline in the status of the aged people. 55 respondents said "very greatly" and 33 respondents said "greatly" regarding the association of education and status of the aged people. Only 25 respondents said "no relationship" between both the variables.

# **Testing hypothesis**

The hypothesis for the current study is "modernization decreases the status of the aged people"

Following Table No.03 shows the frequencies of testing hypothesis

Modernization and Status of the Aged People				
	Observed N	Expected N	Residual	
Very greatly	52	37.5	14.5	
Greatly	64	37.5	26.5	
To some extent	18	37.5	-19.5	
Not at all	16	37.5	-21.5	
Total	150			

Table No 03. Frequencies of Hypothesis Te	sting
---	-------

This table shows that "very greatly" and "greatly" have a positive residual which shows a reverse relationship between modernization and status of the aged people.

# **Chi-Square test**

To find out the relationship between modernization and status of the aged people chi-square test was used.

Following Table No.04 shows the Chi-square test results

Table No 04. Chi-Square Test			
	Modernization influencing status of		
	the aged negatively		
Chi-square	46.800		
df	3		
Asymp. Sig.	.000		

Table	No	04.	Chi-Square	Test
rabic	140	υ	Cin-Square	rest

0 cells (.0%) have expected frequencies less than a.

5. The minimum expected cell frequency is 37.5

The data analysis shows that modernization has a negative impact on the status of the aged people. A statistical test chi square was applied on the data Chi square (x = 46.800 P = .000). According to the X value significant difference was found so that the hypothesis was supported.

# Qualitative data analysis

On the basis of the indicators used to gauge the status of the aged the responses were thematically studied. The researchers found themes on the basis of the indicators. The findings of the research are in accordance with the indicators.

The social status of the aged people was measured by using 4 indicators i.e. participation in the family functions, frequency of the visits to the family, friends and neighbors, the number of suggestions taken by the friends, family and

neighbors and how much those suggestions were valued and finally how much a person was active in the community development. All the respondents answered the questions in a very positive manner and showed that they were enjoying a very high social status. Most of the respondents indicated that they were being treated by other family members encouragingly so the aged enjoyed a very high social status. They visited the family functions and other such activities to a great deal implying high social status.

The first measure for the psychological status was that how much a person was happy at the news of his retirement and how much he was glad and contended with his life after the retirement. The second measure of the psychological status was how much a person was optimistic about his future or the future of his children and grandchildren and how much a person was depressed. The answers given by the respondents suggested that most of the aged persons were satisfied with their retirement as they had completed a long phase of their life with perfection and without any disruption. Furthermore the aged were optimistic about the future life of their children and grandchildren. They were interested in the future and studies of their children. These items suggest that the aged people are not depressed and have a very good psychological status.

The first measure of the economic status was how much a person was economically independent to bear his own expenses, the level of responsibility of family, routine expenses, the decision making power in the family matters and the job opportunity and the willingness to do the job. The economic status of the aged people was found to be high as they were independent in their expenses and more importantly their decision making power in the family is still very high. Every important decision with regard to monetary terms of the family was taken by the aged people.

The physical status of the aged was measured on the basis of three indicators and the first measure of the physical status was how much a person did his own work, how much a person got sick during one year, how much attention he paid to his health by means of specific foods. The physical status of the aged people was very high because they were very conscious about their diet and they used to do their daily routine work by themselves. The analyzed data show that the aged people enjoy a very high status in this modern world. Social, psychological, economic and physical status of the aged people is high.

#### Triangulation of the findings of the study

The objective of the current study was to find out how modernization had influenced the status of the aged people. It was proposed by the researchers to adopt mixed methods approach to enhance the validity and reliability of the study. However, both studies i.e. qualitative and quantitative produced somewhat contradictory results. The quantitative study showed a positive and significant association between modernization and status of the aged people. On the other hand qualitative study found that in Pakistani context aged people enjoy a good

social, physical, economic and political status. The primary reason behind this contradiction was found to be the cultural and religious orientation among the society. Similarly, the domains and indicators of modernization were somewhat at the earlier stage and aged people were less victimized by this modernization. The study produced that modernization was affecting the status of the aged as the trend was on increase. Modernization is pacing up so as the status of the aged is being affected.

## Discussion

In 1990 Logue proposed that the status of the aged people decreased as they grow old but in contrary to that current research revealed that the status of the aged people did not decrease, as they grew old. Cohen (2002) also found similar attributes regarding status of the aged people.

Richard M. Cohn (1982) and McConatha et al, (2004) hypothesized that status decline among aged was caused by their relative displacement from high status occupational groups. The findings of the research disclosed that besides disengaging aged people from their occupation they did not lose their status. Tunstall (1966), Iqbal (1983) and Nourine & Rani (2000) concluded from their researches that the aged people were more likely to be the victim of social isolation. According to that research aged people were not socially isolated they were able to spend the most of their time with friends, family and neighbors and joined their participation in the community development.

Cornwell, Laumann & Schumm (2008) conducted a study on a very large database. They concluded that age was found positively related to frequency of socializing with neighbors, religious participation, and volunteering. The findings of the research exposed that the occurrences of the meetings with friends, family and relatives were found very high similarly they participated in the community development very much.

Rabia (1996) conducted a study and found the abandonment perspective about the aged people which meant that the aged people were less respected and less valued by the society and family but the findings of the research revealed that the aged people were very much valued and respected by the family and the society. Femia et al, 2008 also found same results regarding status of the aged people.

The social adjustment level of the aged people in the society is very high (Shaheen, 1983). So it is not difficult to infer that the social adjustment level is still very high among the aged people after 3 decades. Aged people are still very much adaptable to their situation after growing old.

Olson (1988) conducted a study in China and proposed that most of the aged people live below the poverty line and 80% of the aged people are greatly dependent upon their families for their economic and social support but, in

contrast, the findings of this particular research revealed that the aged people are not dependent upon their families for their expenses after retirement.

#### Conclusion

The findings of this research clearly show that the social, psychological, economic and physical status of the aged people is high despite the changing conditions after the retirement. All of the respondents enjoy a very good social life and they are economically independent. Similarly they are physically quite healthy to do their own work and they do not face any kind of tension or depression and are very happy and satisfied. So, the overall status of the elderly is still very high in Pakistani society.

When the researchers look at the social status of the elderly after their retirement the findings of the study show a similar kind of trend. The family visitation and the attending family events are very high among the respondents. The findings of this particular study clearly show that the psychological status of the elderly is still quite good at this age.

When looking at the economic status of the aged people a similar kind of trend is seen as in the social status. The aged people decide the most of the money matters and family decisions. Although they take their sons' consent but still they are the ultimate decision makers. The physical status of the elderly is also very good. The frequency of falling ill is very low among the entire respondents and most of the respondents are well able to do their own work either by choice or by habit.

When it comes to see how modernization has influenced the status of aged. The study concludes that there is a significant relationship between the two variables. All four indicators of modernization as explained by Cowgill and Holmes are found to be true in Pakistani setting. Health technology, economic technologies, urbanization and education separately and collectively has changed the status of the aged people.

#### References

- Arnold-Cathalifaud, M., Thumala, D., Urquiza, A. & Ojeda, A. (2008) Young people's images of old age in Chile: *Exploratory Research. Educational Gerontology*, 34(2), 105-123.
- Azhar, G. & Sabzwari, S. R. (2010). Aging in Pakistan, Department of Family Medicine, *The Aga Khan University Hospital*, Karachi, Pakistan.
- Clark, M. & Barbara Anderson. (1967). *Culture and Aging: An Anthropological Study of Older Americans*. Charles C. Thomas, Publisher, Springfield, Illinois.
- Cohen, H.L. (2002) Developing Media Literacy Skills to Challenge Television's Portrayal of Older Women. *Educational Gerontology*, 28, 599-620.

- Cohn R. M (1982) Economic Development and Status Change of the Aged. *The American Journal of Sociology, Vol.* 87, *No.* 5, *pp.* 1150-1161: The University of Chicago Press Stable URL http://www.jstor.org/stable/2778422
- Cowgill, D O., & Holmes, L. D. (1972). Aging and Modernization. Appleton-Century-crofts, New York.
- Cowgill, D. O. (1974). Aging and modernization: A Revision of the Theory. In J.F. Gubrium, ed., Late life: Communities and environmental policy. Charles C. Thomas, Publisher, Springfield, Illinois.
- Department of Health and Children (DoHC) (2007) Health in Ireland: Key Trends 2007. Department of Health and Children, Dublin.
- Fatimi, Z. & I. Avan I. (2002) Demographic, Socio-Economic and Environmental Determinants of Utilization of Antenatal Care in Rural Setting of Sindh, Pakistan. J Pak Med Assoc 2002; 52: 138–142.
- Femia, E.E., Zarit, S.H., Blair, C., Jarrott, S.E. & Bruno, K. (2008) Intergenerational preschool experiences and the young child: Potential benefits to development. *Early Childhood Research Quarterly*, 23(2), 272287.
- Ha, N.T., P. Berman and U. Larsen. (2002). Household utilization and expenditure on private and public health services in Vietnam. *Health Policy Plan* 2002; 17: 61–70.
- Hall, K.W. & Batey, J.J. (2008) Children's Ideas about Aging before and After an Intergenerational Read-Aloud. *Educational Gerontology*, 34(10), 862-870. (http://www.statpak.gov.pk/depts/fbs/statistics/pds2001/table02.pdf)
- Iqbal. J. (1983). Social Isolation In Old Age. Unpublished master's thesis Sociology Department PU
- Keesing, Felix. (1934). Modern Samoa. Allen and Unwin, London.
- Logue B. J (1990) Modernization and the Status of the Frail Elderly: Perspectives on Continuity and Change. *Journal of Cross-Cultural Gerontology 5: 345-374*
- McConatha, J.T., Hayta, V., Rieser-Danner, L., McConatha, D. & Polat, T.S. (2004) Turkish and U.S. attitudes toward aging. *Educational Gerontology*, 30(3), 169-183.
- Mead, Margaret. (1928). Coming of age in Samoa. William Morrow and Company, New York. 1930. Social organization of Manu'a. Bulletin No. 76, Bishop Museum, Honolulu.
- Musaiger, A.O. & D'Souza, R. (2009) Role of age and gender in the perception of aging: A community-based survey in Kuwait. Archives of Gerontology & Geriatrics, 48(1), 50-57.
- Newman, L. W., (2006). Social research methods (4th Ed.). Boston: Allyn and Bacon.
- Nourine N & Rani N. (2000) .Social Isolation in Old Age. Unpublished master's thesis Sociology Department PU

- Olson P (1988) Modernization in the People's Republic of China: The Politicization of the Elderly. *The Sociological Quarterly, Vol. 29, No. 2 pp. 241-262*: Blackwell Publishing on behalf of the Midwest Sociological Society
- Palmore, E. (1999) Ageism: Negative and positive (2nd Ed.). *Springer Publishing Company*, New York.
- Rabia, (1996). Status of elderly and the modernization. Unpublished master's thesis Sociology Department PU
- Rao, 2003, Health Status of the Rural Aged in Andhra Pradesh; A Sociological Perspective in Help Age India - *Research & Development Journal*, Vol.9, No. 2.
- Shaheen G (1983) Adjustment problems of old age: Sociology Department PU
- Sonalde, B.Desai. (2010). Human Development in India, Challenges for Societies in Transition. *Oxford University Press*. New Delhi 2010.
- Tunstall J. (1966) Old and Alone; A sociological study of old people.
- World Health Organization (WHO) (2009) Definition of an Older or Elderly Person. Available from: http://www.who.int/healthinfo/survey/ageingdefnolder/en/index.html
- Yen, C.H., Liao, W.C., Chen, Y.R., Kao, M.C., Lee, M.C. & Wang, C.C. (2009) A Chinese version of Kogan's Attitude toward Older People Scale: Reliability and validity assessment. *International Journal of Nursing Studies*, 46(1), 38-44.
- Zafar, S. N., Ganatra, H. A., Tehseen, S., & Qidwai, W. (2006). Health and Needs Assessment of Geriatric Patients: Results of a Survey at a Teaching Hospital in Karachi. *Journal of Pakistan Medical Association*, 56(10), 470–473.

#### **Biographical Note**

**Dr. Arfan Latif** is an Assistant Professor of Sociology at Government Degree College, Sharqpur, Higher Education Department. Punjab, Pakistan.

**Shoukat Ali** is Ph.D. Scholar at Centre for South Asian Studies, University of the Punjab, Lahore, Pakistan.

**Zubaida Zafar** is Ph.D. Scholar at Centre for South Asian Studies, University of the Punjab, Lahore, Pakistan.