

## Living Arrangements among the Chakhesang Elders

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**Abstract:** This paper assays an insight into the living arrangement among the Chakhesang elders, a tribal community in Nagaland, India. The study was conducted among 912 individuals with age ranging from 60-101 years. Living arrangements were compared with Standard of Living Index (SLI) for the purpose of understanding the socioeconomic status and Geriatric Depression Scale (GDS) for assessing the degree of depression among the elderly. It was found that, 17.9% of the elders reportedly live alone. Widowhood was the underlying factor which compelled the elders to live alone, both among the men (7.5%) and women (20.7%). Those who live alone belonged to the lowest level of the living index (88.4%) and experienced higher prevalence of depression (72.7%). On the other hand, the most prevalent type of living arrangement was the co-residential type. It was found that 63.3% of the elders were living with a child (including adopted children), child-in-law or grandchild. It was also revealed that, those who were co-residing with children experienced lesser depression and also enjoyed a better standard of living.

**Key Words:** Chakhesang, Elders, Geriatric Depression Scale, Living arrangement, Standard of Living Index.

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### I. Introduction

The status of the elderly are assessed within the purview of various dimensions such as social, psychological, cognitive and biological. Amidst such dimensions, an indicator such as the living arrangement of the elderly occupies an important place as, where people live in their later years will make a significant difference to the quality of their living. The term 'living arrangements' or 'a co-residential arrangement' is used interchangeably to refer to the household structure of the elderly. When living with at least one child (or other kin), the term 'co-residence' is used. Keri (2008) also went on to define the term co-residence as: a multigenerational living arrangement where members of a family, other than a married couple and their non-adult children, reside together in the same household. The reasons of co-residence vary and are determined by a multitude of health-related, economic, and cultural factors. The living arrangement is an important aspect having a bearing on the well being of the elderly. This factor often affects the nature and amount of support the elderly receive, status and prestige they enjoy and access to emergency help when required (Thomas & Diengdoh, 2007). In India, it is taken for granted that families are the most natural living habitat for people of all ages, including the old, frail and the disabled (ibid). Availability of carers in case of illness, disability, emergencies, depends on living arrangements (Prakash, 1999). For instance, those elders who live alone are more likely to require outside assistance in the case of illness or disability and are at a greater risk of social isolation. Living arrangements of older people are influenced by several factors such as gender, health status, presence of disability, socio-economic status and societal traditions (ibid). Moreover, preferences for a particular type of living arrangement are influenced by values of privacy and the level of needs/resources among the elderly. Living arrangements of older persons can also have important macroeconomic and social implications. For instance, if more older persons maintain households separate from those of their adult children, this can increase the demand for housing, social services and energy, water and other resources (UN, 2005).

The western model of family living arrangement is predominated by a nuclear household setup. Instances of adult children living with their parents are uncommon as children leave early to fend for themselves leaving the elderly to either reside independently of the children or live in assisted living facilities/old age homes. While in India, the family or more particularly, the joint family system has been the traditional social institution for the support and care of the elderly. Among the Indians, the notion of kinship ties for support through the life course is central to everyday life. It stipulates that it is the duty of a child-particularly a male child- to provide parental support in their old age, traditionally in the form of co-residence (Jadhav et al., 2013). Consequently, generations of older Indians have found shelter in the extended family system during crisis, be it social, economical or psychological. However, the traditional caretaker of the elderly in India, which is the joint family, is a dying institution (Vandana & Subramanyam, 2004). With urbanization, families are becoming nuclear and smaller and care for older relatives are becoming more and more challenging. In most cases, sons live with their family away from the older parents in congruity with their place of work. A decline in the prevalence of multigenerational households and the migration of younger workers from rural to urban areas

have geographically separated many adult children from their ageing parents, altering and arguably undermining traditional patterns of support to rural elders (Silverstein et al., 2006). Currently, women have started working outside the home. Women were traditional carers for old people and so women's labour force participation has reduced the number of workers available to care for their elderly relatives (Prakash, 1999). Living in old age homes is neither popular nor feasible. Allowing parents to live in old age homes draws criticism from the family network and society at large.

As such, the elders are oftentimes left on their own. The situation is still securer when the elderly is living with a spouse but a crisis arises when mortality claims one of them, compelling the other to live alone. In addition to widowhood, childlessness and migration of children (as mentioned earlier) are what contributes to this type of living arrangement. The concept of living alone is not straightforward: It could signify financial ability to live independently, while it might also point to social isolation from one's family (Tohme et al., 2011). Added to this, is the fact that there are more elderly women surviving to older ages than their male counterparts (Davanzo et al., 2011). As such, older women are more likely than older men to live alone, especially where the overall proportion of living alone is high. The reasons behind this 'feminisation of population' are many. For instance, the large age gaps between men and women- husbands are usually older than their wives; life expectancy is higher for women and widow remarriage is more popular among men. Due to all these factors, women are at a greater and particular risk of living alone in old age.

## **II. Materials and Methods**

### **2.1. Study Area**

Nagaland state was formally inaugurated on December 1<sup>st</sup>, 1963 as the 16<sup>th</sup> state of the Indian union. It is bounded by Assam in the west, Myanmar in the east, Arunachal Pradesh and part of Assam in the north and Manipur in the south. The state approximately lies between 25°6' and 27°4' latitude, north of equator and between the longitudinal lines 93°20'E and 95°15'E. The State consists of eleven administrative districts, inhabited by 16 major tribes along with other sub-tribes. Chakhesang tribe constitute one of the major tribes of Nagaland. Each tribe is distinct in character from the other in terms of customs, languages and dresses. The 2011 census of India report recorded the total population at 1,978,502 and it was found to be the only state in the country to record a decrease in population with -0.58% decadal growth since 2001.

The Chakhesang Nagas were long considered to be a part of the Angami tribe and were known as the Eastern Angamis. The term 'Chakhesang' is composed of three different words: *Cha* from Chakru, *Khe* from Khezha and *Sang* from Sangtam thus creating an amalgam 'Chakhesang' which was recognised by the government around 1947 (Ganguly, 1984; Singh, 1990). Phek district was carved out of Kohima district on 21<sup>st</sup> December, 1973. The district covers an area of 2,026 sq km with a total population of 163, 418 (census, 2011) and it is home to the Chakhesang and the Pochury Naga tribes. The district shares its boundaries with Zunheboto and Kiphire in the north, Manipur in the south, Myanmar in the east and Kohima in the west. The main stay of the people is agriculture. They grow rice, millet, job's tear, maize, pumpkin, gourd, yam, chilli, ginger, etc. Locally prepared bamboo shoot, fermented soya bean, rice tea, maize tea and a host of other items constitute their everyday menu. They follow the patriarchal, patrilocal and patrilineal family system.

Although the ancient ideal of the joint household was prevalent throughout Indian society- the ideal that all the sons after their marriage should continue to live together with their parents.....was practised to a lesser extent among the lower castes and classes and tribal groups which constituted the overwhelming majority of Indian society (Shah, 1999). Among the Chakhesangs, households are generally unitary. In the rural areas i.e., villages, the married son usually establishes a new home in the vicinity of his natal home. The joint family system is not favoured. But in most cases, however the old parent(s) live with the youngest or the eldest son, depending on the rules of inheritance that exist among different villages. This type of living arrangement is often confused with nuclear family and at the same time it also contributes to the high figure in terms of proportional joint households. As long as the father is alive, he remains the rural head of his agnatic core and the representative of all his sons and other agnatic kinsmen, if he is the oldest person among them.

The study was conducted among 912 (425 males and 487 females) free-living rural Chakhesang elders who were between 60-101 years. The data collection was done in 20 Chakhesang villages under Phek district, Nagaland, viz., Enhulumi, Chizami, Kami, Khezhakeno, K. Basa, K. Bawe, Lekromi, Lasumi, Leshemi, Losami, Mesulumi, Pfutseromi, Phusachodu, Phuyoba, Rihuba, Sakraba, Thenyizu, Thetsumi, Thipuzu, and Zapami. No statistical sampling technique was applied for the selection of the villages because the criterion was dependent on the presence or absence of elderly participants in these respective locations. Purposive sampling was taken into consideration to include those elders who were 60 years and above, who were mentally receptive and willing to participate in the study. Most aged individuals did not have an official record of their birth date; as such, the age was estimated by matching recall of particular historical events.

### **2.2. Methodology**

### 2.2.1. Living arrangement Classifications

The United Nations, 2005 employed five mutually exclusive categories as the basic comparative schemes for living arrangements of older persons around the world. They are:

1. Living alone
2. Living with spouse only
3. Living with a child (including adopted children), child-in-law or grandchild
4. Living with another relative (other than a spouse or child/grandchild)
5. Living with unrelated people only, apart from older person's spouse

An important feature of this scheme is that it is determined by familial relationships of household members, not household headship, which can assume different meanings according to the cultural context (UN, 2005).

### 2.2.2. Data on Socioeconomic Status (SES)

A household measure called the Standard of Living Index (SLI) developed by the National Health Family Survey (NFHS-2), 2000 was used to assess the socioeconomic Status. The NFHS is a large-scale, multi-round survey conducted in a representative sample of households throughout India and is a collaborative project supported by national and international organisations. Altogether, 11 factors were considered such as house type, toilet facility, source of lighting, main fuel for cooking, source of drinking water, separate room for cooking, ownership of house, ownership of agricultural land, ownership of irrigated land, ownership of livestock and ownership of durable goods. Accordingly, the scores were summed up and index scores range from 0-14 for a low SLI, 15-24 for a medium SLI and 25-67 for a high SLI.

### 2.2.3. Geriatric Depression Scale (GDS)

GDS was used to assess the degree of depression among the elderly and the different types of living arrangements. The GDS is a self-reporting scale developed to measure depression particularly in the older population (Yesavage et al., 1983). The scale consists of 15 questions which has a yes/no answer, with the scoring dependent on the given answer. Out of the total 15 points, the following categorisations were followed to assess the various levels of depression among the elderly:  $\leq 5$  = No Depression;  $>5$  and  $\leq 10$  = Suggestive of Depression and  $>10$  = Depression.

## III. Results

### 3.1. Socio-demographic characteristics

The mean age of men in the sample was 73.6 years while that of women was 71.8 years and the overall mean was 72.6 years. With regard to marital status, the percentage of currently married men (78.4%) were more than currently married women (51.7%) and widowed women (43.5%) were more than widowed men (16.5%). Majority of the samples are illiterate (78.1%) and cultivators (89.1%) while there is a gender disparity in all the levels of education and various occupations as is evident from Table 1. The most common level of activity is the primary level (65.1%) which includes everyday agricultural chores. Both men and women are equally involved in agricultural activities as there is no concept of "conventional housewife" in this society. More men (36%) are involved in secondary level of activity such as axing, lifting heavy loads, clearing forests, etc as compared to women (25.1%). A comparatively low percentage (4.7%) of the elders is sedentary, due to infirmities or sicknesses. As with monetary income from Government sources, a mere 9.1% are salaried while 32.7% are recipients of the Indira Gandhi National Old Age Pension Scheme (IGNOAPS). The rest are dependent on husbandry, basketry, weaving, etc for generating income.

**Table 1: Socio-demographic Characteristics of the Chakhesang Elders**

| Characteristics          | Men    |      | Women    |      | Total    |      |
|--------------------------|--------|------|----------|------|----------|------|
|                          | N      | %    | N        | %    | N        | %    |
| <b>Sample Size (N)</b>   | 425    | 46.6 | 487      | 53.4 | 912      | 100  |
| <b>Age (Mean±SD)</b>     | 73.6±9 |      | 71.8±8.6 |      | 72.6±8.8 |      |
| <b>Marital Status</b>    |        |      |          |      |          |      |
| Currently Married        | 333    | 78.4 | 252      | 51.7 | 585      | 64.1 |
| Widowed                  | 70     | 16.5 | 212      | 43.5 | 282      | 30.9 |
| Never married            | 21     | 4.9  | 18       | 3.7  | 39       | 4.3  |
| Separated                | 1      | 0.2  | 5        | 1.0  | 6        | 0.7  |
| <b>Educational Level</b> |        |      |          |      |          |      |
| Illiterate               | 259    | 60.9 | 453      | 93.0 | 712      | 78.1 |
| Primary                  | 75     | 17.6 | 18       | 3.7  | 93       | 10.2 |
| Middle                   | 50     | 11.8 | 11       | 2.3  | 61       | 6.7  |
| High School              | 33     | 7.8  | 5        | 1.0  | 38       | 4.2  |
| Higher Secondary         | 5      | 1.2  | -        | -    | 5        | 0.5  |

|                           |     |      |     |      |     |      |
|---------------------------|-----|------|-----|------|-----|------|
| Graduate                  | 3   | 0.7  | -   | -    | 3   | 0.3  |
| <b>Occupational Level</b> |     |      |     |      |     |      |
| Farmers                   | 336 | 79.1 | 477 | 97.9 | 813 | 89.1 |
| In Govt. Service          | 14  | 3.3  | 3   | 0.6  | 17  | 1.9  |
| Retired Govt. Servants    | 61  | 14.4 | 6   | 1.2  | 67  | 7.3  |
| Religious                 | 4   | 0.9  | 1   | 0.2  | 5   | 0.5  |
| Village Officials         | 10  | 2.4  | -   | -    | 10  | 1.1  |
| <b>Level of Activity</b>  |     |      |     |      |     |      |
| Primary                   | 252 | 59.3 | 342 | 70.2 | 594 | 65.1 |
| Secondary                 | 153 | 36.0 | 122 | 25.1 | 275 | 30.2 |
| Sedentary                 | 20  | 4.7  | 23  | 4.7  | 43  | 4.7  |
| <b>Type of Income</b>     |     |      |     |      |     |      |
| Salaried                  | 69  | 16.2 | 14  | 2.9  | 83  | 9.1  |
| Old Age Pension           | 116 | 27.3 | 182 | 37.4 | 298 | 32.7 |

Following the United Nations, 2009 classifications, the following observations on living arrangements were made from the present study:

**Table 2: Living arrangements among the Chakhesang elders**

| Living Arrangements  | Men<br>(N=425) | Women<br>(N=487) | Total<br>N=912 |
|--|----------------|------------------|----------------|
| Living alone (%)   | 46<br>(10.8)   | 117<br>(24.0)    | 163<br>(17.9)  |
| Living with spouse only (%)  | 89<br>(20.9)   | 68<br>(14.0)     | 157<br>(17.2)  |
| Living with a child (including adopted children), child-in-law or grandchild (%) | 282<br>(66.4)  | 295<br>(60.6)    | 577<br>(63.3)  |
| Living with another relative (other than a spouse or child/grandchild) (%)       | 8<br>(1.9)     | 7<br>(1.4)       | 15<br>(1.6)    |

The fifth category of living arrangement as classified by UN, 2009 i.e., ‘living with unrelated people only, apart from the older person’s spouse’ was not reported among the subjects, hence the category has not been discussed. All the occupants of a household were in one way or the other related. From table 2, it is evident that the most preferred type of living arrangement among the Chakhesang elders is the one where they live with a child (including adopted children), child-in-law or grandchild (63.3%). In this category of living arrangement, the older persons were not only living with their offspring but it was revealed that larger group of grandparents were caring for grandchildren in the absence of the middle generation. An almost equal percentage of elders are either living alone (17.9%) or living with spouse only (17.2%). While, living with another relative (other than a spouse or child/grandchild) was observed to be a mere 1.6%. Whoever reported of living with another relative were either unmarried individuals or divorcees. This category of elders mostly reported to have been living with their siblings or the sibling’s family. Also, the probability of living alone increased with increase in age.

Gender differences in the proportion of older persons living alone among the Chakhesang elders shows women living alone (24.0%) to be more than double the proportion of older men living alone (10.8%). In the other categories, more men reported to be living with spouse (20.9%), living with a child (66.4%) or living with another relative (1.9%) as compared to women (14.0%, 60.6% and 1.4% respectively).

Table 3 presents the living arrangement and marital status of the Chakhesang elders. Marital status, particularly widowhood as a potential determinant of living arrangement emerges as an underlying feature for elders living alone. It is evident that widowhood, both among the men (7.5%) and women (20.7%), is the main reason for elders living alone. In this study, it was also revealed that the prevalence of unmarried individuals living alone was more prevalent among the men (30.4%) than the women (11.1%). There was no report of men who was/were separated and living alone while among the women, 0.6% was found to be living alone after separation.

**Table 3: Living arrangements and marital status among the Chakhesang elders**

| Living Arrangements       | Marital Status |          |            |           |               |            |            |           |
|---------------------------|----------------|----------|------------|-----------|---------------|------------|------------|-----------|
|                           | Men (N=425)    |          |            |           | Women (N=487) |            |            |           |
|                           | Never married  | Widowed  | Married    | Separated | Never married | Widowed    | Married    | Separated |
| Living Alone (%)          | 14 (3.3)       | 32 (7.5) | -          | -         | 13 (2.7)      | 101 (20.7) | -          | 3 (0.6)   |
| Living with Spouse (%)    | -              | -        | 89 (20.9)  | -         | -             | -          | 68 (14)    | -         |
| Living with Child (%)     | -              | 38 (8.9) | 244 (57.4) | -         | -             | 111 (22.8) | 184 (37.8) | -         |
| Living with Relatives (%) | 7 (1.6)        | -        | -          | 1 (0.2)   | 5 (1.0)       | -          | -          | 2 (0.4)   |

**Table 4: Living Arrangement and Standard of Living Index (SLI)**

| Living Arrangement        | Standard of Living Index (SLI) |                |              |
|---------------------------|--------------------------------|----------------|--------------|
|                           | Low (0-14)                     | Medium (15-24) | High (25-67) |
| Living Alone (%)          | 38 (88.4)                      | 124 (14.7)     | 1 (3.6)      |
| Living with Spouse (%)    | -                              | 151 (18.0)     | 6 (21.4)     |
| Living with Child (%)     | -                              | 557 (66.2)     | 20 (71.4)    |
| Living with Relatives (%) | 5 (11.6)                       | 9 (1.1)        | 1 (3.6)      |

Table 4 is a representation of the living arrangements in relation to socioeconomic status. If we look at the ‘living alone’ category, those who reported living alone mostly belonged to the lowest category of the living index (88.4%) followed by ‘living with relatives’ category (11.6%). Those who were living with spouse or with children fared better in the standard of living.

**Table 5: Living arrangements and Geriatric Depression Scale (GDS)**

| Living Arrangement      | Geriatric Depression Scale (GDS) |      |                                       |      |                  |      |
|-------------------------|----------------------------------|------|---------------------------------------|------|------------------|------|
|                         | No Depression (≤5)               |      | Suggestive of Depression (>5 and ≤10) |      | Depression (>10) |      |
|                         | N                                | %    | N                                     | %    | N                | %    |
| Living Alone            | 125                              | 16.6 | 30                                    | 20.5 | 8                | 72.7 |
| Living with Spouse only | 131                              | 17.4 | 25                                    | 17.1 | 1                | 9.1  |
| Living with Child       | 488                              | 64.6 | 87                                    | 59.6 | 2                | 18.2 |
| Living with Relatives   | 11                               | 1.5  | 4                                     | 2.7  | 0                | .0   |

From table 5, ‘no depression’ (64.6%) was mostly observed among those elders who were living with children/grandchildren (at least one child or in case of skipped-generation, at least one grandchild), who may/may not have a spouse in the house. While, elders who were living with children also reported to have the highest percentage in the ‘suggestive of depression’ category. Among those who were found to be depressed, those elders who were living alone were found to be most depressed (72.7%), followed by living with a child/children (18.2%). Those who were living with spouse constituted a lesser percentage (9.1%) within the depressed category.

#### IV. Discussion

In the present study, 17.9% of the elders reportedly live alone. Widowhood was the underlying factor which compelled the elders to live alone, both among the men (7.5%) and women (20.7%). Those who live alone belonged to the lowest level of the living index (88.4%) and experienced higher prevalence of depression (72.7%). On the other hand, the most prevalent type of living arrangement was the co-residential type. It was found that 63.3% of the elders were living with a child (including adopted children), child-in-law or grandchild. This study is similar to the one carried out by Jadhav et al. (2013), where it was found that the dominant type of living arrangement across all categories remains living with one’s spouse, children and grandchildren. Dzüvichü, 2007 also reported that that majority of the elders (75.78%) lived with the children while 8.64% of them lived alone. Furthermore in the present study, those who were co-residing with children experienced less depression and also enjoyed a better standard of living. As such, co-residence seems to be a more beneficial type of living arrangement so far as the present study is concerned. It may be mentioned again that, though the figures show a high incidence of co-residence, conventional ‘joint family’ per se is unpopular among the

Chakhesangs. However, common is the trend where older parents either co-reside with unmarried child/children or grandchild/children in the absence of the middle generation. In India, elderly parents co-residing with their children can serve a dual purpose: children can take care of their parent's health and daily needs, while parents can provide childcare for young grandchildren. These are non-financial aspects of co-residence that typify a joint living arrangement. Other benefits include those to elder health, particularly in terms of the relationship between co-residence and self-rated health, chronic and short-term morbidity (Sudha et al., 2006). Silverstein et al. (2006) found that older adults reap the rewards of extended family integration. Older parents living with both adult children and grandchildren, but not those living with adult children only, experienced favourable psychological outcomes. The traditional system of children living with ageing parents also served as a function of their joint participation in the family economy and the necessity to pool resources and labour across generations.

With urbanisation and the migration of children to urban areas, the structures of living arrangement among the rural Chakhesang elders are already undergoing change. As such, in a short span of time the figures that portrayed co-residence in the present study will likely show a huge decline. Other research findings have been reported in other Asian nations, where researchers observed sharp reductions in co-residence rates between older parents and adult children (Knodel & Ofstedal, 2002). However, residential preferences of the aged themselves should be taken into account as well, especially in response to declining family values and growing instances of neglect. In a study by Alam, 2006, he found the living preferences of the elderly respondents to be quite surprising. He observed that a majority of them (51.08%) did not prefer to reside with their children, though they preferred to live near them. Staying alone was the least preferred choice. Clearly therefore, while a majority of the urban aged may not be willing to live in a joint family system, they are also averse to the idea of living far from children and relatives. A much larger fraction of the high income group elderly (66.7%) preferred living alone, though in the vicinity of their children. In contrast, more than 57.7% of the slum respondents opted for joint living with children. Most of them would however like to keep rotating residence at their will (ibid).

The scenario of living arrangement, as such, may differ in certain situations. Hence it cannot be overruled that living arrangement preferences differ across societies and also personal choices of the elders should never be undermined. For instance, privacy is a normal good for both Americans and Chinese (Lei et al., 2011). While, in a study on a tribal community in Tamilnadu, India, Maruthakutti (2011) found that from the perspective of Kanis, privacy is not a privilege, but is regarded as isolation. Living alone in the urban setting might point towards financial independence while in the rural set-up, the opposite might be true. It is possible then, that India is moving toward a more western system of living arrangement, where highly educated, functional elderly in good health are more likely to live independently of familial structures by choice rather than compulsion.

## V. Conclusion

Social security needs to be provided to those vulnerable elders whose situation demands so, as the 'support given to the elderly' and 'taking care of the elderly' are two different concepts. While support of the elderly is defined as providing financial assistance, care of the elderly is defined as extending emotional support, which can be provided only by family members or by those persons with whom the elderly live (Rajan & Kumar, 2003). There is not one sure solution and different strategies need to be adopted in different situations. Alternatives such as old-age homes or day care may be considered with the support of non-governmental organisations and voluntary associations among this community, but more preferably after a survey on the living arrangement preferences of the Chakhesang elders as well as the community at large. This kind of survey will be necessary to appraise of the feasibility and viability as living in old-age homes might draw criticism from the family or society. It is hoped that this initial work will provide some insights and that it would serve as groundwork for future researches in the interest and welfare of the elders.

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