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Ageing in Care Homes

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Ageing in Care Homes

Place Attachment and Homemaking Practices of Older Adults in
Kerala, India

Nikhil Pazhoothundathil Narayanan

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Ageing in Care Homes

Place Attachment and Homemaking Practices of Older Adults in
 Kerala, India

PhD thesis

to obtain the degree of PhD at the
 University of Groningen
 on the authority of the
 Rector Magnificus Prof. C. Wijmenga
 and in accordance with
 the decision by the College of Deans.

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Dedicated in loving memory of my grandparents

Ammu (Janaki)
&
Peediyechan (Kesavan)

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Chapter 3

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Chapter 4

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Chapter 5

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Chapter 6

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Chapter 1

Introduction

1.1 Background of the study

1.1.1 Global ageing

The world's population is quickly ageing. This phenomena, where the absolute and relative share of older adults is expected to grow at a relatively faster phase compared to other age groups, is understood as a consequence of demographic transition (Rajan, Sarma, & Mishra, 2003). According to the 2017 revision of the World Population Prospects published by the United Nations (2017), the world population aged 60 years or over numbered 962 million in 2017, comprised 13 percent of the global population and was growing at a rate of about three percent per year. Moreover, the number of older persons doubled in size from 382 million in 1980 to 962 million in 2017 and is expected to grow by 1.4 billion in 2030 and 2.1 billion by 2050. In 2017, one in eight persons globally was aged 60 or over. The greater increase in numbers of older adults aged 80 or over can be attributed to improvement in health care infrastructure and compressed mortality at later ages (United Nations, 2017). Although the population ageing process is most advanced in regions such as Europe and North America in the Global North, two thirds of the global older adult population now lives in low- and middle-income countries where their numbers are growing faster than in the Global North (United Nations, 2017).

Similar to the ageing process, the household living arrangements of older adults vary across regions and countries. According to the World Population Ageing report (United Nations, 2017), the proportion of persons aged 60 or over living independently (living alone or with a spouse) is very low in Afghanistan (2.3 percent) and highest in the Netherlands (93.4 percent). Living arrangements and family sizes are largely influenced by multiple factors such as socio-cultural norms, family income, the desire for independent living as well as abandonment and destitution. In Asia, greater importance for promoting the wellbeing of older adults is given to norms around multi-generational co-residence, filial piety and kinship. Culture, norms and values are intrinsically embedded in the traditional care system of older adults (Sung, 2001; Zhang & Goza, 2006). As a result, residential and geriatric care homes are relatively new in low- and middle-income countries (Al-Jawad, Rashid, & Narayan, 2007; Mayer, 2017; Menezes & Thomas, 2018). In low-and middle-income Asian countries, institutional care homes often host abandoned or otherwise vulnerable older adults without families. The for-profit and retirement community concepts are now emerging in middle income countries such as India.

1.2 Institutional care for older adults in India

India is the second largest populated country in the world. As per the 2011 census, India has 1.21 billion people and the share of the population over the age of 60 constitutes 8.1 percent of the total population (Registrar General of India, 2011). The share of older people is expected to reach 19 percent in 2050 and 34 percent by the end of the century (United Nations, 2015). Population ageing varies across states in India; southern states are the front runners with Kerala's older adult population at 12.3 percent followed by Tamil Nadu with 11.2 percent. According to the recent Longitudinal Ageing Study in India (LASI), 41 percent of older adults aged 60 and above live with their spouses and children. More than one-fourth

of older adults without a spouse live with their children while around 6 percent of older adults live alone. More than 9 percent of older adult women live alone compared to 3 percent of older adult men (International Institute for Population Sciences et al., 2020).

In the patriarchal Indian cultural context, older adult care is generally seen as the duty of adult children, which often results in the daughter-in-law becoming the primary care giver (Liebig, 2003; Ugargol & Bailey, 2020). The concept of formal care homes for older adults was introduced in India during the early 18th century by the British colonial administration and missionaries (Lamb, 2009; Liebig, 2003). Traditionally, these care homes served the poor as well as destitute older adults. Several Indian researchers observe that a series of change—such as urbanization, industrialization, migration (both internal and international), a shift to a more materialistic and individualistic way of life and increased participation of women in the labor force—has resulted in changes in the availability of care givers within the family (Datta, 2017; Jamuna, 2003; Nair & Kumar, 2017; Rajan, Sarma, & Mishra, 2003). As a result of these societal changes, ‘formal care services’ for older adults have received considerable attention over the last two decades, especially in urban areas (Mayer, 2017). As an alternative to traditional informal care services, institutions providing geriatric care, such as old age homes, have become the major source of care services to promote older adult wellbeing. Older adults’ change in place of residence—from (family) homes to institutional care homes—is often considered to result from an absence of filial piety. Care homes frequently symbolize the “abrogation of familial responsibility” and are often stigmatized as “sites where one ‘abandoned relatives’ (Brijnath, 2012: 709). Even though only a small portion of older adults use institutional care services, it is expected that the need for institutional care services will increase and there will be increased demand for such services (Nair & Kumar, 2017; Pathania et al., 2018). In 2007, the Government of India enacted the Maintenance and Welfare of Parents and Senior Citizens Act. This law envisages the provision of setting up old age homes in every district of India (Ministry of Social Justice and Empowerment, 2007). By setting up institutional care homes in every district, Kerala is the only state in India to succeed in making this provision a reality. In fact, all 14 districts in the state of Kerala have at least one care home for older adults under the control and maintenance of the Social Justice Department of Kerala.

Two types of older adult care institutions exist in India: non-profit care homes and for-profit care homes (Johnson et al., 2018). Non-profit care homes are generally operated by government bodies or charitable organizations with or without government assistance; they admit poor, destitute, abandoned and neglected older adults (Samuel et al., 2016). Compared to non-profit care homes, residents in for-profit care homes enjoy more privacy, better health care services and western-style amenities (Gupta et al., 2014). According to Help Age India (2009) there are 1,276 geriatric care institutions in India. More than half of these institutions (50.24 %) are in South India (Datta, 2017). Care homes are excluded from household surveys; hence there is no data at a national level on the population living in care homes.

Generally, studies on institutional care homes for older adults in India focus on various issues such as services available for older adults, the reasons older adults live in care homes, health

issues and the level of older adult satisfaction in care homes (Bhattacharyya & Chatterjee, 2017; Kalavar, Jamuna, & Ejaz, 2013; Kavita, Bipin, & Geeta, 2012; Panigrahi & Syamala, 2012; Pathania et al., 2018). Ethnographic studies by Sarah Lamb, (2009, 2010, 2013a, 2013b) in different care homes India reflect the complexities of lived experiences characterized by older adult's socio-economic status, gender and power relations. Qualitative research on older Indian adults have thus far largely focused on older adults in home settings (Ahlin & Sen, 2019; Bailey, Hallad, & James, 2018; Bomhoff, 2011; Jahangir et al., 2018; Ugargol & Bailey, 2018, 2020). Research on place attachment and homemaking practices of older adults in institutional care homes is hardly addressed in the Indian context. To have a sense of home in a new setting is very important for the wellbeing of older adults (Klaassens & Meijering, 2015). This study thus focuses on place attachment and homemaking processes of older adults living in institutional care homes in Kerala, India.

1.3 Institutional care home and older adults' wellbeing

Home constitutes a significant aspect of wellbeing for older adults as it is a central place marked by many positive factors such as family bonds, care and care reciprocity, (Ugargol & Bailey, 2020); domestic routines and rhythms (Lager, van Hoven, & Huigen, 2016); social relationships; religious and cultural practices (Bailey, Channakki, & Hutter, 2008; Mazumdar & Mazumdar, 2005); and life course events; material possessions; memories and emotional investments (Cristoforetti, Gennai, & Rodeschini, 2011). These positive factors enable older adults to develop a sense of belonging and insideness, including physical, social and autobiographical insideness (Lager, van Hoven, & Huigen, 2016; Rowles, 1983), towards their home and its environments. However, the positive effects of the home may not be applicable to older adults who experience family abuse and neglect. When an older adult moves to a care home, they enter into a different care environment with new care relations and expectations. For example, affective care relations between a mother and her son in a family home are replaced by a professional and formal care relationship between an older woman and her caretakers in care home. Additionally, autonomy and agency in decision-making for an older adult can be influenced by power relations that exist in a care home. In these situations, the process of active ageing of older adults in the care home is determined by how new environments positively benefit them. For example, what activities help older adults maintain a daily rhythm in the care home? How do older adults maintain a sense of continuity in care homes? What are the roles of interpersonal relationships that promote the wellbeing of older adults in a care home? These are questions we need to put forward to better understand an older adult's sense of belonging and thus their level of wellbeing. Feeling at home in a formal care setting can have a positive effect on the wellbeing of older adults because it fosters sense of autonomy, sense of safety, self-confidence, and social integration (Meijering & Lager, 2014; Smith, 2009). As we pointed out in the previous section, there are studies on the physical as well as psychological health of older adults as well as the availability of health care services in care homes, but studies largely ignore aspects of place attachment and sense of belonging in care homes (Gupta et al., 2014; Johnson et al., 2018; Kalavar & Jamuna, 2011; Kavita et al., 2012; Pathania et al., 2019; Rajan, Sunitha, & Arya, 2017). In these studies, older adults were seen as mere receivers of care and other services. To help fill this research gap, we applied a framework to analyze how older adults maintain place attachment

and recreate a home environment in institutional care homes. In this study we recognize the performative roles of older adults; these roles allow older adults to utilize and modify their care home environments to recreate home in a formal care setting and to establish self-identity, daily rhythms, and continuity in life.

1.4 Research objective and thesis outline

The overall objective of this study is to gain insight into the processes of place attachment and homemaking for older adult wellbeing in care homes in Kerala, India. The research questions following this main objective are:

1. What different pathways do older adults follow to institutional care homes and how are socio-economic backgrounds, culture, and gender reflected in the autonomy and decision-making processes in these pathways?
2. What motivates older adults to retain their previous homes while residing in for-profit retirement homes? How do older adults maintain previous homes? And how are these motivations linked to a sense of place attachment?

In addition, the following research questions inductively emerged as part of data collection and analysis:

3. How do older adults engage with their cherished possessions and how do possessions help in the homemaking process and promote emotional wellbeing in care homes?
4. How do older adults (re)create home through domestic daily rhythms and caregiving practices in an institutional care home?

1.5 Theoretical framework

The conceptual model designed for this study (Figure 1.1) is adapted from the tripartite model of place attachment developed by Scannell & Gifford (2010) combined with theories on cultural schemas (D'Andrade, 1992). In addition, other theories (on home, material culture and emotional geography) have been applied in the analysis and interpretation of data collected during qualitative fieldwork.

1.5.1 Theories informing the deductive conceptual model

According to the tripartite model, place attachment interlinks with three dimensions, namely person, place and psychological dimensions. The *person dimension* refers to the actors involved in place attachment processes and the extent the attachment is individually and collectively constituted. The *place dimension* emphasizes the characteristics of place and includes the social and physical characteristics of a place. Finally, the *psychological dimension* emphasizes how affect, cognition and behaviors manifest in place attachments.

A place becomes valuable when experiences embedded in the place are evoke **emotions** such as happiness, pride and love (Chapter 5). **Cognitive** elements such as memory and knowledge about a place help to establish and maintain place attachment (Chapter 4). Memory evokes emotions and knowledge establishes the meanings of places. **Attitude** towards a place is determined by how useful a place is for a person or a community. When a place is perceived

as highly useful, people are likely to develop a more pleasant attitude towards the place. Changes in the utilization of a place bring concomitant changes in attitudes as well.

Figure 1.1 Conceptual model of the study

Another important component of place attachment is **belief**. For example, religious beliefs and practices associated with a place are able to inspire attachment towards a place (Chapters 5 and 6). It is not necessary for a person to have visited these religious places; instead, the religious values associated with the place become part of a person's place attachment. Another important aspect of place attachment is the life course of the older adult and the significant others in their lives (for example, spouses). Various important life events that have occurred bring changes in the role of older adults and the value they attribute to the place they confront on a daily basis. Intensity of place attachment is also determined by the interpersonal relationships of a person. Through **interpersonal relationships** (Chapters 3, 4, and 6) people exchange experiences, meanings and care. Most often, interpersonal relationships with family members are very strong and so therefore is the attachment to home. When an older adult starts living in an institutional care setting, the physical and social characteristics of the

institution could be totally new and different from pre-institutional life. Various **coping** strategies and action aid older adults in developing new place attachments. In such situations, **possessions** play an important role in maintaining continuity and establishing a feeling of security in a new place (Chapter 5). **Resources** are another important element in establishing place attachment; the availability of resources and facilities can increase or decrease an older adult's dependency on previous places and thus the value of a place. Places with more utilization value aid in establishing a space for new roles and intensified interpersonal relationships in that place. The **ownership characteristics** of things, including material culture associated with a place, are another aspect which recreates a sense of place (Chapter 4). Ownership and attachment to material culture are also linked to the creation of places that are perceived as safe and secure.

The concept of **homemaking** is intrinsically connected with the concept of place attachment. The intermediate components of place attachment, along with the **socio-economic** and cultural aspects of the society or institutions, determine the process of homemaking (Chapter 5 and 6). **Cultural schemas** determine and identify the concept of home (Chapter 4) and also provide motivation for homemaking behaviors. The role, and the ability of a person to be involved in the homemaking process, is largely determined by the **gender and power** status as well as the socio-economic status of the older adult and the institutions in which they reside (Chapters 4, 5, and 6). Older adult care institutions can be characterized by different levels of **socio-economic status**; because the norms, regulations, resources and facilities vary across different institutions, we can assume that the homemaking process in these settings also differ. As a result, the **homemaking** process of older adults in care institutions can be considered to be an interplay of the **cultural schema, gender and socio-economic status** attached to older adults as well as the institution. The **homemaking process** of older adults, used to develop identity and to feel safe and secure, ultimately leads to experiences of subjective **wellbeing** in institutional care settings (Chapters 4, 5, and 6). Wight (2012) defines wellbeing as "the state of being comfortable, healthy or happy" (p. 241). In literature on place-making, wellbeing in older adults is understood in relation to many aspects such as sense of safety and security; a sense of belonging; a sense of autonomy and independence; a sense of continuity; and social integration (Black, 2008; Chaudhury & Rowles, 2005; Cutchin, 2003; Meijering & Lager, 2014; Park, Han, Kim, & Dunkle, 2015; G. Rowles, 1983; A. E. Smith, 2009). So, in this study, we examine how the wellbeing of older adults living in institutional care homes reflects in place attachment and the homemaking process.

1.5.2 Cultural schema and homemaking

Culture in a society, which is shared among a group of people and passed on from one generation to another, determines people's beliefs, values and behaviors. It has even been argued that individual reasoning, perception, and interpretation are motivated by cultural schemas (D Ándrade, 1992; de Haas & Hutter, 2019; Vaisey, 2009). Cultural schemas are shared to shape individual perception, belief, attitude and expectation (D Ándrade, 1992; Strauss & Quinn, 1997). Cultural schemas are hierarchically organized and have the ability to instigate action. According to Strauss and Quinn (1997), "when the cultural belief becomes a part of inner sense of a being they become goal driven and acquire motivational force" (p.26).

Higher-level schemas which function as goals are considered to have high motivational force. Middle- and lower-level schema generate goals in interaction with higher-level schema (D Ándrade, 1992). For example, belief, perception, and expectation attached to the concept of ‘home’ in a culture shape homemaking practices. We argue that, when older adults move to an institutional care home, the cultural meaning system attached to the concept of ‘home’ will act as a driving force to (re)create a homely atmosphere and enhance wellbeing—a higher level of schema—in a formal care setting. Thus, through the use of our cultural schema framework, we aim to obtain a better understanding how cultural value and belief are linked with place attachment and home-making practices (Chapters 4 and 5).

1.6 Theories applied to interpret the themes emerging from the qualitative fieldwork

1.6.1 Home, material culture, and emotional geography

The following theoretical concepts and ideas were applied as interpretive frames for the empirical material that emerged from the fieldwork in Kerala. These concepts are further elaborated in the following chapters. In Chapter 5, we integrate the theories of emotional geographies (Anderson & Smith, 2001; Davidson & Milligan, 2004; Varley, 2008; Wood & Smith, 2004) with material culture in care homes to examine how cherished possessions embedded with different meanings, multiple emotions, and memories help older adults to turn the formal care setting into an integrated domestic space. Co-presence as a concept also aids in bringing deeper understanding to the meaning people attach to their possessions. According to Baldassar (2008), photographs and images help to build co-presence by proxy while religious activities such as praying help to construct co-presence by imagination. Thus in a care home, material culture and memories reflect emotional care exchanges between older adults and their friends or family members (Alinejad, 2019; Madianou, 2016). In Chapter 6, we analyze how recreating daily rhythms and kinning contribute towards developing a sense of home for older adults in not-for-profit care homes. Kinning is defined as “the process by which a previously unconnected person is brought into a significant and permanent relationship with a group of people that is expressed in a kin idiom” (Howell, 2003: p. 465). According to Highmore (2002), for an individual, value of place is highly integrated with everyday habitual routine and behavior connected with that place. For example, habitual and the time-bound routine of domestic activities and exchange of in-home care constitute a rhythm in daily life which intensify the value of a place. Everyday use of these habitual routines creates a rhythmic order in life and confers a sense of familiarity and security in the places people live. As older adults move from family settings to living in care homes with non-kin, they may develop new attachments and relationships with fellow residents and caregivers. Studies report that formal care relationships between caretakers and care receivers often developed over time into the form of kinning, where the intensity of a care relationship brought previously unconnected individuals into a permanent relationship similar to familial ties (Baldassar, Ferrero, & Portis, 2017; Howell, 2007; Sahlins, 2011). This kind of kinship helps to develop positive and mutual regard between care receivers and caretakers through both physical and emotional care negotiation (Baldassar, Ferrero, & Portis, 2017). Here, kinning substitutes for the missing familial ties and helps to widen the social support network for an older adult in a care home setting.

1.7 Organization of the thesis

This thesis is organized into seven chapters. Chapters 3, 4, 5, and 6 highlight various themes related to the research questions on place attachment and the homemaking experiences of older adults living in institutional care homes. Research questions for Chapters 3 and 4 are based on the deductive conceptual model while research questions in Chapters 5 and 6 inductively emerged as part of data collection and analysis. Principles of grounded theory were used for the analysis to generate the themes that are presented in this chapter.

Chapter 2, dealing with research design and the study population, presents the context of the study and the insider/outsider dynamics and positionality of the researcher. We also describe the methods used for the collection and analysis of the empirical materials.

Chapter 3 (based on Research Question 1 (RQ1)) presents the mobility experiences of older adults living in institutional care homes. This chapter examines the different pathways older adults traveled to institutional care homes and how socio-economic backgrounds, culture, gender and power relations are reflected in the autonomy and decision-making processes within these pathways.

Chapter 4 (based on RQ2) explores the motivations of older adults for retaining ownership of family homes while residing in a for-profit care home. Homes are embedded in different kinds of emotional attachments and; older adults pursue different strategies to maintain the feeling of home while living in institutional care homes. This chapter explains the relationship between older adults from higher socio-economic backgrounds and their previous homes through the theories of cultural schema, place attachment, and cherished possessions.

Chapter 5 (based on RQ3 inductively developed through the analysis) investigates the homemaking process of older adults within care homes. Specifically, we want to know how cherished possessions, which are embedded with different meanings, multiple emotions and memories, help older adults constitute the care home into an integrated domestic place with a sense of belongingness, security and continuity. We integrated the theories of cultural schema with concepts from emotional geography and material culture to analyze and interpret the findings. This study recognizes the importance of cherished possessions in the emotional wellbeing of older adults in the Indian cultural context.

Chapter 6 (based on RQ4 inductively developed from the analysis) explores the homemaking practices of older adults living in a welfare based and non-profit care home. Specifically, we examine how older adults (re)create home through daily domestic rhythms and caregiving practices in an institutional care home. In this chapter we incorporate the theories of rhythm and kinning to explain relationship between homemaking practices and active ageing in a formal care setting.

Chapter 7 brings together the key findings and implications of the study. This chapter starts with a short recapitulation of the research objectives and questions followed by a summary and the main findings for each research question. Chapter seven also includes theoretical and

methodological reflections and formulates our implications of the findings and recommendations.

Chapter 2

Research design and study population

2.1 Introduction

This chapter presents the research design as well as the procedures used for data collection and analysis. We also present in detail: the demography and socio-economic characteristics of the study region; the methodology; the practical procedures used during fieldwork; and the positionality of the researcher in the field.

2.2 Study setting

Fieldwork for the study was conducted between April and December 2015 at three care homes in the Kottayam District of the State Kerala. (see figure 2.1). As per the Census of India 2011, the population of Kerala was 33,387,677 which accounts for 2.76 percent of the country's population. At 12.6 percent, Kerala is one of India's southern states with the highest proportion of older adults (Registrar General of India, 2011) and one with the highest index of ageing with 97 older adults per 100 children (Subaiya & Dhananjay, 2011). Life expectancy at birth in Kerala is also the highest among the states in India at 75 years. The growth rate of the older adult population in Kerala is higher than any other state in the country; in fact, the proportion of the older adult population has increased at a rate double the overall growth rate of the population in Kerala. The proportion of the older population, at 5.83 percent in 1961, reached 12.6 percent in 2011 and is expected to increase to 18.3 percent in 2026 (Government of India, 2006). According to Help Age India (2009), 14 percent of the total number of older adult care homes in India are in Kerala, a state which shares only 2.76 percent of the country's population.

In 2006, Kerala was the first state in India to develop a 'State Old Age Policy'; it was further amended in 2013 for the welfare of older adults. This policy emphasizes the need for both non-profit and for-profit older adult care homes (Social Justice Department, 2013). According to this policy, all kinds of care homes for older adults (both non-profit and for-profit) should register with the Orphanage Control Board which functions under the Social Justice Department of the Government of Kerala. According to Social Justice Department (2019), there are a total of 614 care homes registered under or recognized by the Orphanage Control Board. (see Table 2.1), a total of 599 non-government care homes (which include both non-profit and for-profit care homes), and 15 Government-run care homes.

Figure 2.1 Study location: The Kottayam District in the State of Kerala, India

Source: Author

Table 2.1 Overview of care homes for older adults in Kerala recognized by the Orphanage Control Board (as of 2019)

Sl No	District	Non-Government	Government	Total
1	Thiruvananthapuram	49	1	50
2	Kollam	24	1	25
3	Pathanamthitta	34	1	35
4	Alappuzha	30	1	31
5	Kottayam	79	1	80
6	Idukki	26	1	27
7	Ernakulam	122	2	124
8	Thrissur	98	1	99
9	Palakkad	35	1	36
10	Malappuram	7	1	8
11	Kozhikkodu	24	1	25
12	Wayanad	19	1	20
13	Kannur	39	1	40
14	Kasargod	13	1	14
15	Total	599	15	614

Source: Social Justice Department, Government of Kerala, (2019)

For this study, institutional care homes are categorized into three groups:

- (1) Non-profit care homes meant for poor and destitute older adults;
- (2) For-profit as well as religious care homes for older adults from the middle class; and
- (3) For-profit and secular care homes for older adults belonging to middle- and upper-middle income groups.

Non-profit care homes are found in all of Kerala's districts. For-profit and religious care homes (for middle class adults) are mainly administrated by Catholic groups from South and Central Kerala. For-profit and secular care homes (for middle- and upper-middle income groups) are a newly emerging group of institutions focusing on return migrants from high income countries and older adults who have lived abroad for shorter periods of time. They are few in number and not available in all districts. In the Kottayam District, all three types of institutional care homes are present.

For this study, we selected three institutional care homes exclusively for older adults, one from each of the three categories. In order to simultaneously conduct the investigation, all the three care homes are selected from Kottayam District. Within the State of Kerala, the Kottayam District has the highest proportion of older adults in the population (16 percent) next to the nearby Pathanamthitta District. Hinduism and Christianity are the prominent religious groups in Kottayam. Around 50 percent of the total population are Hindu whereas 43.5 and 6.3 percent are Christian and Muslim respectively (Registrar General of India, 2011). Throughout this thesis, pseudonyms are used for the care homes and the research participants.

2.2.1 Study population

Data for this study were obtained from qualitative research conducted in 2015 (April to December) at three care homes for older adults located in the Kottayam District of Kerala, India. One of the institutes is a welfare-based care home for poor older adults. The second is a faith-based retirement home for older, middle-class adults while the third is a secular retirement home for older, upper middle-class adults. In order to maintain anonymity, the following pseudonyms are used for the care homes:

- **Prasanthi Bhavan** is a non-profit care home subsidized by the state;
- **Trinity** is a for-profit and Catholic care home for older, middle-class adults; and
- **Sahya** is a for-profit secular care home catering to affluent older adults.

2.2.2 Prasanthi Bhavan

Prasanthi Bhavan is a state subsidized, non-profit care home for poor and neglected older adults. Situated in a village 25 kilometers from the city of Kottayam, Prasanthi Bhavan operates out of a rented, double-storied building. At the time of data collection, a total of 22 older adults resided in the care facility (12 men and 10 women). Among them, four women and two men required physical assistance to fulfill daily needs. Administrative staff and caretakers of Prasanthi Bhavan include a superintendent; a female matron; two female caretakers; two cooks; one office assistant; and a security guard. Due to a lack of nursing facilities, administrators prefer to admit able-bodied adults. However, if an older adult becomes bedridden after admission, staff will provide care. Female residents share four bedrooms on the ground floor. The floor also features one room for the matron and female caretakers; an administrative room; a kitchen; a work area; a common dining hall; a bathroom; and two attached restrooms. A narrow corridor between rooms functions as a common space where older female adults watch TV. Male residents are housed in a dormitory-type facility on the first floor. The first floor additionally consists of the superintendent's room; an Ayurvedic medicine storeroom; a toilet; and a bathroom. Male residents can watch television in the dorm room. Although the care home has a washing machine and hot water for bathing, many residents prefer to wash their clothes and prepare hot water on a small, wood-fired stove in the courtyard. As most of the older adults are destitute or have difficult relationships with their children, very few have contact with family members.

Older adults receive help from the public in the form of food and clothing. To avoid spicy food and any chance of food poisoning, Prasanthi Bhavan does not accept food that has been cooked off-premise. Those who want to offer food must first reserve a date in advance and pay the meal costs at the care home office. Those who offer food and clothes usually visit Prasanthi Bhavan with their family members. These visitors share lunch with care home residents and so provide an opportunity for older adults to socialize with the public. The government additionally provides two medical checkups every month: one modern medicine

and one Ayurvedic. A separate medical file, in the form of a notebook, is maintained for each older adult. As per government record, Prasanthi Bhavan is classified as a Grade-1 care home. A Grade-1 care home is supposed to be able to admit 100 older adults. Nonetheless, Prasanthi Bhavan lacks sufficient space to admit more than 25 residents. As Prasanthi Bhavan functions out of a rented building, adding additional rooms is not possible. During the data collection period, administrators were thinking of shifting the care home to a new location with better facilities.

2.2.3 Trinity

Trinity is a faith based and for-profit care home catering to older adults from the middle class. This three-storied retirement home is managed by a Catholic group and lead by nuns. A separate chapel was built inside the retirement home where daily mass and prayer are conducted. There is separate staff for cooking, washing, and cleaning. Each resident has their own room with bathroom and toilet facilities attached. Older adults residing in this retirement home are from districts close to Kottayam. Since there are no nursing facilities, only the able-bodied are accommodated. At the time of data collection (2015), individual admission could be secured with a deposit of Rs 100,000 (approximately US \$1560); residents incur a monthly amount of Rs 10,000 (approximately US \$156) for room and board. While most of the residents in the care home were Catholic, support staff came from different religious backgrounds.

2.2.4 Sahya

Sahya is a profit-based care home catering to the upper-middle class that is situated in a hilly area and managed by a trust. Newly built in 2015 and presented as a secular institute, most of the older adults were retired international and internal return migrants. This care home offers nursing services and so accommodates both able-bodied and non-able-bodied residents. The home is well-equipped with facilities including a library, internet access, an elevator, a vehicle, air-conditioned rooms, and a garden. Trained staff were deployed in each department for supervision, nursing care, cooking, cleaning, washing, gardening and security. Every week, three doctors performed medical check-ups. Residents generally lease a room. At the time of data collection in 2015, the lease amount of a single room was in the range of Rs 2.5 million to 2.7 million (approximately US \$39,000 to \$42,000). Additionally, food and basic services per resident cost Rs 16,000 (US \$250) per month. While all care homes in Kerala are required to register at the Orphanage Control Board (Social Justice Department 2013), Sahya and Trinity registered as a trust as administrators' state that residents are not orphans.

2.3 Participant recruitment

Participants taking part in this study were recruited with the prior permission of all three care homes. In order to obtain permission for the study, a written request form was submitted to the supervisory board of these institutions. Since care home management are very keen to maintain the privacy of the older adults, it took several days to get the permission for the study, particularly for the upper-middle class retirement home. Several visits, phone calls, and email communication were made to ensure the permission from Sahya. Before starting the

first interview, three visits were made to each retirement home to build rapport with the older adults. Later we sought separate permission from older adults and caregivers. We did not recruit participants who were sick and bedridden as they could not give consent. Each participant was informed about the research before their participation and their consent was recorded. Photographs were taken with prior permission of the retirement home and participants.

2.4 Data collection methods

2.4. In-depth interviews.

To address the four research questions, in-depth interviews were chosen as the main method for data collection. In-depth interviews are regarded as one of the most suitable methods to explore personal experiences (Hennink, Hutter, & Bailey, 2011; Reichstadt et al., 2010; Robertson & Hale, 2011). In-depth interviews were conducted with thirty-seven (37) older adults (23 women and 14 men) and four (4) caretakers and administrators (see table 2.2). The aim of the in-depth interviews was to explore individual experiences, perceptions and meanings of place attachment and homemaking practices of the older adults in care homes particularly in relation to cultural schemas; gender and power relations; and socio-economic backgrounds. Though the initial plan was to conduct the study concurrently at all the three care homes, difficulties in obtaining permission to conduct the study in for-profit care homes forced the research to begin at the non-profit care home. Since the administrators of the for-profit care homes were very concerned about the privacy of the older adults, it took many phone calls, mails and multiple visits to get the permission from Trinity and Sahya. By the time interviews at Prasanthi Bhavan were almost completed, permission to conduct the study at Trinity (home for middle-class adults) was provided. Once half of the interviews were conducted at Trinity, Sahya provided permission for the fieldwork.

The fieldwork in each care home started with a pilot study. Pilot studies involved six interviews or two interviews at each care home. The aim of the pilot study was to acquire initial knowledge and contextual understanding of the care home. The pilot study also enabled the interview guides and the probes that could be used in the different care homes to be fine-tuned and expanded. In Trinity and Sahya, interviews were conducted in the private rooms of older adults. In Prasanthi Bhavan, interviews were conducted in communal spaces in order to protect the privacy of the older adults, as they were sharing rooms with other residents. Before starting the first interview, I made three visits to each care home in order to build rapport and to observe the settings and interactions between older adults in common spaces. Building rapport with older adults in Prasanthi Bhavan was relatively easier than in Sahya and Trinity. Generally, non-profit care homes encourage the involvement of younger people from society as long as they first approach the care home through the proper channels. Once rapport was built, participants were very enthusiastic. Each interview, conducted up to the point of information saturation, lasted approximately one and a half hours.

Table 2.2 Profile of participants interviewed in care homes (N=41)

Care home	Female	Male	Caretaker/ Administrator	Total
Prasanthi Bhavan	10	5	2	17
Trinity	7	5	1	13
Sahya	6	4	1	11
Total	23	14	4	41

2.4.2 Observation

Observation enabled the researcher to systematically observe people's behavior, actions and interactions in a socio-cultural context and to obtain detailed descriptions of social settings and events (Hennink, Hutter, & Bailey, 2011). Observation also helps to bring greater understanding and interpretation of cultural behavior (Mulhall, 2003) in communal and personal spaces of care homes (van Hoof et al., 2016). To get permission to conduct the study, multiple visits were made to each care home; non-participant observation started during these initial visits. Initial visits also helped the researcher to understand care home settings as well as to begin building rapport. Observations also helped with cross checking the information shared by the participants in their interviews. The physical setting of retirement homes, the material possessions cherished and used by older adults, and the way older adults engaged with different material possessions were observed, as were the activities of older adults within the retirement homes. Personal room facilities and arrangements of rooms were observed at the time of the interview. Compared to Sahya and Trinity, Prasanthi Bhavan offered more opportunity and freedom to interact with older adults and to conduct participant observation. Once permission was received from the higher authority, the older adults and the administrators treated me as a member of the Prasanthi Bhavan. I was invited to share the lunch and tea every day I visited Prasanthi Bhavan. In Prasanthi Bhavan I participated in serving food and in dining with older adults; I also accompanied older adults to the hospital. Continuous interaction with the older adults in Prasanthi Bhavan helped to develop trust between me and the older adults. Older adults at Prasanthi Bhavan asked me to bring flowers from my home and my neighborhood to make '*pookkalam*' as part of Onam (a regional festival in Kerala; see Chapter 6 result and discussion sections about the celebration of festivals at Prasanthi Bhavan). I received special invitations to celebrate festivals such as Onam, Christmas, and for other special events such as the International Day for the Older Person. Observations also helped to contextualize the information shared in interviews. All observations were noted in a field diary during fieldwork and were additionally incorporated into explanations of the context.

2.4.3 Photographs

Visual methods serve manifold purposes in qualitative research. Studies show that photography as a visual method facilitates communication and the rapport-building process (Pain, 2012); encourages engagement with the research study process (Rhodes & Fitzgerald, 2006); provides the researcher with a way into the participants' world (Gold, 2004); provides visual material as adjuncts to oral or written communication (Gallo, 2001); and encourages participants to reflect on their experiences (Johnsen, May, & Cloke, 2008; Latham, 2003). The

main aim of photography as a visual method in this study was to enrich the narratives around homemaking practices through a look at a wide range of cherished possessions used by the older adults in their personal rooms (see Chapter 5). Permission to take photographs was obtained from both participants and administrators. During interviews, older adults were asked about the cherished possessions they carried from their family home to the care home. After the interview, these possessions were photographed to document and validate the range of possessions discussed during the interviews. In Chapter 5, we used the photographs to describe the different kinds of cherished possessions and how they contribute to the emotional wellbeing of older adults in care homes. Care home settings, homemaking activities, and the interpersonal relationships between older adults were also photographed.

Based on the photographs and participant quotations, the first results of this part of the study were developed into posters. Designed together with Ruben Bouwman, a researcher from The Netherlands and a professional photojournalist, the posters were exhibited at different occasions in India and the Netherlands. The objective was to convey the first results of the study in academic as well as non-academic audiences as early as possible. These posters also helped us to make sure that the data collection process addressed the main concepts of the study. For example, Figure 2.2 illustrates a homemaking activity of an older adult living in the non-profit care home of Prasanthi Bhavan while Figure 2.3 illustrates the interpersonal relationship between older adults and caretakers in Sahya, the for-profit care home. More posters are included in the Appendices.

2.5 Ethical considerations

The present study was approved by the Ethics Committee of the Faculty of Spatial Sciences at the University of Groningen in the Netherlands. the Directorate of Social Justice granted permission for fieldwork in non-profit care homes in Kerala. The Directorate of Social Justice is a Kerala State Government agency which acts as a nodal implementing organization for all programs of the Social Justice Department. The approval letter issued by the Directorate of Social Justice was submitted to the district office of the Social Justice Department in Kottayam and to Prasanthi Bhavan, the non-profit care home selected for the study. Before interviews began, separate permission was also granted from care home authorities at Prasanthi Bhavan, Trinity, and Sahya.

Interviews were conducted at the convenience of participants. During the interview process, participants were informed about the study's objectives and consent was obtained verbally or through a signed consent form. Participants were assured that their participation was voluntary, that they could withdraw at any time, and that privacy and anonymity would be maintained throughout all stages of the research.

Observations did not disturb the personal space, privacy or community life of the residents. Additional consent was taken from the participants and care home administration to take photographs. Privacy and anonymity were maintained at all stages of data collection, analysis and reporting.

Figure 2.2: Homemaking activity of an older adult in Prasanthi Bhavan

Ageing in Institutional Settings Kottayam, Kerala, India, 2015

Keeping Chickens

A link with past life

"I am a widow. I have one son and two daughters. I don't know where they are now. When I was young I struggled a lot to take care of these children. I lost my husband when these children were small kids.

Although I don't use egg or meat, I used to domesticate hens for my children. Here also I don't use egg or meat. But I don't know why I take care of these hens and cocks?

Every day in the morning I used to feed them with the leftovers of my breakfast. Then I release the cocks from the cage and keep the hens in the cage, until they give that day's egg. I keep the egg in the fridge. I don't know what will happen to the egg. Any way I don't use it, so why should I bother about it? Those who want may take it. In the evening I close the cage when all the hens and cocks are inside (Older adult, widow, 82 years old)."

Ageing in a Globalizing World

Figure 2.3 Interpersonal relationships between older adults and caretakers in Sahya

2.6 Data analysis

Qualitative data analysis, involving a process of immersion in the data (Braun & Clarke, 2006), enables researchers to remain close to the data; to identify and interpret the experiences of the study participants; and to form an evidence-based understanding of the research issues (Hennink, Hutter, & Bailey, 2011). All interview guides were designed in English and then translated into Malayalam (the vernacular language in Kerala); all interviews were then conducted in Malayalam. To start the data analysis process, all data was transcribed verbatim. The Malayalam transcripts were then translated into English. After transcribing the data into written form, names were replaced with pseudonyms to maintain anonymity. Before starting the coding process, the authenticity and quality of the transcripts and the translation were checked. Reading all translated scripts also helped me to experience 'immersion in the data', that is obtain a general sense of what is happening in the data (Braun & Clarke, 2006). I used the software Atlas.ti-7 to manage and analyze the data. For analysis, principles of grounded theory were adopted (Charmaz, 2006; Glaser, 1978; Glaser & Strauss, 1967; Strauss & Corbin, 1998). This involved various stages such as developing and defining codes and code

data, as well as describing, comparing, categorizing conceptualizing and developing theory (Hennink, Hutter, & Bailey, 2011). In the first cycle of coding, primary codes were developed both inductively and deductively. Primary codes were developed through the line-by-line coding of each data set which enabled me to stay as close as possible to the data. In the second cycle, code families or theme or categories were developed by grouping different primary codes based on common attributes and guided by analytic research questions. In a series of consecutive interpretive stages, different theories (e.g., theories of emotional geography; cultural schema, rhythm and kinning) were integrated with the emerging categories or code families (Hennink, Hutter, & Bailey 2011). The coding and categorization process continued until saturation was reached (Charmaz, 2006). In the following chapters, we have detailed the different codes and categories that emerged from the data.

2.7 Positionality and reflexivity

In qualitative studies, the researcher is an instrument of data collection (Creswell, 1998). The interpretive approach in qualitative research acknowledges that the researcher's background, social identity, position and emotions will contribute to the co-construction of reality during the process of data collection (Finaly & Gouch, 2003; Hennink, Hutter, & Bailey, 2011). Making sense of how the researcher's background, position and social identity can influence the research process is an integral feature of qualitative research (Robson, 2002). For Hennink, Hutter, & Bailey (2011), "Reflexivity is a process that involves conscious self-reflection on the part of researchers to make explicit their potential influence on the research process" (p.19). I executed this study along with my specific positionality which is based on: nationality and regional identity based on the Travancore region (South Keralite from Kerala in India); language (Malayalam as mother tongue); professional education (demography and social work); researcher (doctoral student); gender (male); marital status (unmarried); social status (middle-class family and son of retired high school teachers); religion (born and brought up in a Hindu matrilineal family). Since I cannot separate myself as a researcher from my inherent positionality, I cannot claim one hundred percent value-free research. My professional background in demography along with my regional background as a Keralite inspired me to take up a research in the domain of ageing in Kerala. My background in social work influenced my approach in two ways. First, I critically analyzed my research objective and research questions in terms of addressing a societal problem and bringing immediate change or benefit to the study participants. After contemplating the study's benefits, I realized that my research could not bring any immediate change or significant benefit to study participants. Second, my background in social work influenced and inspired me to see institutional care for older adults in a positive light, which is especially contrary to the general perception that older adults living in institutional care homes were being thrown away by their families.

Fieldwork started with multiple field visits. I started building rapport with participants during these field visits. Interaction with participants were more active in Prasanthi Bhavan than the other two care homes. My status as researcher, an educated person, and son of retired high school teachers helped me to establish credibility and trust among older adults in Prasanthi Bhavan. I also shared the insider/outsider status with the participants. Being a Keralite and a

native speaker of Malayalam, I was viewed as an ‘insider’ who shared the mother tongue with participants and who had the ability to understand the cultural reference points of research participants. This insider position provided many advantages in being able to recognize verbal and non-verbal clues and hidden assumptions underlying the behaviors of research participants. For example, older adults are culturally sensitive to the manner in which they are addressed by others. If a relatively a younger person refers to an older adult by their name during conversation, the behavior will be perceived as disrespectful and so will generate mistrust. Generally, older adults can be referred to as ‘amma,’ ‘ammachi,’ ‘aunty,’ ‘umma,’ or madam (for women) and ‘acha,’ ‘appacha,’ ‘uppa’ or uncle and sir (for men) during conversation (*amma*, *ammachi* and *umma* are synonyms for the word mother; *acha*, *appacha* and *uppa* mean ‘father’). But again, selecting each of these names requires a regional, religious, cultural and personal sensitivity. I also had to select which of these terms would build the most rapport with a particular person. Being alert and sensitive to these cultural norms helped me to gain better access to study participants. The social status of older adults also plays a large role in what they are likely to be referred to during a conversation. While the older adults in Prasanthi Bhavan could be called either *amma*, *ammachi*, *acha*, or *appacha*, they never wanted to be called aunty, madam, uncle or sir. Selecting a preferred name for the older adults in Sahya was more complex. Though they shared the same socio-economic status, some of the older adults preferred to be called *amma* or aunty while others preferred ‘madam.’ As an insider, sharing the same regional culture with older adults, I was able to properly address the older adults during our conversations.

I was aware of my status as an outsider due to age, sex, religion and profession. I gained both advantages and disadvantages because of this outsider status. Cultural norms regarding my age and gender do not allow a man to ask women very sensitive questions. As a religious outsider, older adults in Trinity consciously made an effort to explain their Christian customs or norms. For example, one research participant stated, *“Let me explain. I've got three daughters. There's a custom of adoption. Here, the son in-law will be adopted by the family of the daughter after marriage. That is, instead of marrying the daughter off to a husband's home, the son in-law is supposed to stay at the wife's family, after marriage. That's followed by the absence of a son in the family.”* Here participant’s recognition of my outsider status as a non-Christian facilitates an explanation about the cultural norms which helped to enrich the data collection process. Fortunately, my status as an outsider—a researcher—helped me to collect more personal information which older adults had not shared with their roommates. For example, during the interview I asked for information about the cherished possessions which older adults carry with them to the care home. After the interview, I asked permission to photograph those cherished possessions. Maheswari (82 years), a female living in Prasanthi Bhavan, said she brought a lamp as a cherished possession, which she kept a secret; others in the care home were not aware of it. As per the rules of Prasanthi Bhavan, older adults are not supposed to keep valuable objects with them. I expressed my wish to take a photograph of the lamp, if possible. She said she was sharing the room with two other roommates, so it might be difficult to take photographs. After two days, one afternoon during tea time, Maheswari *amma* approached me and said, *“It's a good time, nobody is in my room, all are out for tea. You can come and take photographs now.”* This is because the participants recognized me as an

outsider (as a researcher and student) and knew the information shared with me would be safe. As a result, the advantages of being an outsider overshadowed the disadvantages.

Chapter 3¹

Pathways to care homes: The lived experiences of older adults from Kerala, India

¹ This chapter is an adapted version of the following manuscript which has been revised and resubmitted to the journal *Aging & Society*: Pazhoothundathil, Nikhil., Bailey, Ajay., & Hutter, Inge. Pathways to Care Homes: The lived experiences of Older Adults from Kerala, India.

3.1 Introduction

In India, the concept of care homes for older adults, specifically for marginalized groups, was first introduced by Christian missionaries during the British colonial era (Lamb 2009; Liebig 2003). More recently, changes in family composition, values, norms and care relations have increased the demand for retirement homes. Quite a new narrative that is increasingly visible over the last ten years, these care homes cater to a wide range of socio-economic groups (Lamb 2009). Nonetheless, luxurious retirement homes are often out of reach for low- and middle-income households. Estimates show that 17.7 million older adults in India live below poverty line (Srivastava and Mohanty, 2012). The majority of older adults live in rural areas that are marked by poverty and low literacy levels. In socio-economic terms, older women are especially vulnerable; compared to men, more women are illiterate, hold fewer assets, participate less in household decision-making processes, and spend a larger amount of time in widowhood (Kumari Bhat & Dhruvarajan, 2002; Rajan & Balagopal, 2017; Yadav, 2019). As a result, the growing number of vulnerable older adults is becoming a serious concern for the government and public policy makers.

In order to address the vulnerabilities of older adults, the Government of India enacted the ‘Maintenance and Welfare of Parents and Senior Citizens Act’ in 2007. This act envisages the setting up of ‘old age homes’ in every district of India (Ministry of Social Justice and Empowerment, 2007). In the Indian cultural context of multi-generational living arrangements, care of older adults has generally been seen as the familial duty of adult children. A recent household survey among older adults (Longitudinal Ageing Study in India) shows that about six percent of older adults 60 years and above are living alone. One-fifth of older adults live with a spouse or others and 40 percent of older adults live with a spouse and children (International Institute for Population Sciences et al., 2020) This longitudinal survey also reported that one-fourth of older adults are not satisfied with their current living arrangements.

Care homes, viewed as “sites where one ‘abandoned relatives,’” symbolize the “abrogation of familial responsibility” (Brijnath, 2012: 709). Even though only a small proportion of older adults use care home services, formal care services for older adults receive considerably more attention and so gain importance compared to previous decades (Liebig, 2003). In the near future, as India’s demography continues to change, the tendency to seek care home services is expected to increase, resulting in higher demand for such services (Datta, 2017; Nair & Kumar, 2017).

In Indian society, certain factors—including socio-economic background, culture, and gender—play a large role in decision-making processes both within and outside of the family. Considering the various vulnerabilities associated with old age, an older adult’s change of residence can be seen as a crucial life event that is likely to be interlinked with multiple factors such as socio-economic background, culture, gender, and power relations that exist within families and society. Often, changes in place of residence are quests to limit the vulnerabilities that older adults faced in previous residences. To better understand these dynamics, we focused this study on three types of care homes: care homes for charity

purposes; paid care homes for older, middle class adults; and luxury care homes for the affluent. In this paper we examine the various pathways older adults experienced up to settling in their current care home. Because these pathways include various steps, different people are involved in the decision-making process; furthermore, these decisions play a crucial role in shaping the wellbeing of older adults. The decision-making processes, which set the direction of residence pathways and therefore wellbeing, are shaped by socio-economic status, gender, and power relations that exist in the family and society. This chapter describes the diverse pathways older adults took and the changes they made in residences and living situations before reaching their current care homes, as emerging from our empirical data. Starting at the family home, research participants either moved: 1) directly to a care home; 2) to different living arrangements prior to the current care home; and 3) to various other care homes before residing at the current care home.

3.2 Care home markets in India

There are two types of care homes for older adults in India: non-profit care homes and for-profit care homes. They are generally known as ‘old age homes.’ Care homes in developing countries mainly cater to able-bodied older adults or those with minimum assisted living requirements because a majority of care homes lack nursing care facilities (Rajan, 2002). Non-profit care homes are generally operated by government bodies or charitable organizations with or without government assistance. These homes admit poor older adults who have a comparably better ability to perform Activities of Daily Living or ADL (Jamuna, 2003; Kavita, Bipin, & Geeta, 2012). Residents in these care homes are supposed to care for themselves or each other to “keep them involved in the life of their community, that is old age home” (Liebig, 2003: 168). Liebig (2003) further noted that, as residents in non-profit care homes, older adults are involved in income generation activities and so work for the common welfare of their residential care home. Men typically work in the garden while women are more likely to work on household tasks such as preparing food. When hospitalization is required, older adults in these care homes are admitted into subsidized government hospitals; in case of emergency, the next possible kin—generally the name furnished at the time of admission—is informed (Jamuna, 2003). Such care homes generally provide shared, dormitory-type accommodation. Liebig (2003) additionally noted that non-profit care homes generally provide housing for older adults; these homes are usually older, bigger, and offer less privacy. A regional study conducted in Ahmedabad, in the Gujarat state of India, found that more than 38 percent of geriatric homes are overcrowded (Kavita, Bipin, & Geeta, 2012).

In the paid system, as the name indicates, services are provided on the basis of fees. Paid care homes are considered to be an emerging type of old age home, administered by non-government initiatives such as non-governmental organizations (or NGOs), private trusts, and religious organizations. The majority of these for-profit care homes are located in urban settings and render formal care services for the middle- and upper-middle class (Kalavar & Jamuna, 2011). Indian government policies and reports use the term ‘old age home’ for care homes. Traditionally, the term ‘old age home’ (or OAH) refers to charity-based housing and care for older adults. As a result, administrators of private care homes refer to their institutions as ‘retirement homes’ or ‘retirement villas’ to distinguish private, profit based care homes

from charity-based care homes. The amount of fees paid varies according to quality and quantity of services such as food, accommodation, medical treatment provision, and other basic amenities (HelpAge India, 2009; Jamuna, 2003). These paid care homes can be classified into two types: care homes meant for the middle class and care homes for affluent groups such as retired migrants returning from western countries. Similar to non-profit care homes, for-profit care homes prefer to admit older adults who have better ADL ability, as most of these care homes lack geriatric care facilities. In paid care homes, residents enjoy more privacy and western-style amenities, but are less likely to be engaged in the common welfare of their residential homes (Liebig, 2000; 2003).

Help Age India, an organization working for the welfare of older adults in India, published a directory of 'old age homes' in India. The last revised edition, which came out in 2009, included regional and state-level information such as type of institution (free or paid), address, registration and accommodation details, availability of medical care as well as type of food and toilet facilities (HelpAge India, 2009). According to HelpAge India, there are 1276 geriatric care homes in India. More than half of these care homes (50.24 percent) are in South India. According to the directory, Tamil Nadu accounts for more than 19percent of total geriatric care homes in India. This is followed by Kerala (14percent) and West Bengal (12.85 percent). We can observe that the number of geriatric care homes is high in regions that face a faster pace of population ageing. With its 'State Old Age Policy' of 2006, Kerala was the first state in India to establish a policy for senior citizens. Amended in 2013, the policy requires all care homes in Kerala to register with the Orphanage Control Board (Social Justice Department, 2013). According to the latest report of Kerala's Social Justice Department (2019), a total of 614 care homes are registered under or recognized by the Orphanage Control Board: 599 non-government care homes (which include both non-profit and for-profit care homes) and 15 government care homes.

3.3 Older persons and mobility to care homes in India

In India, filial piety and multigenerational co-residence have traditionally been an integral part of the older adult care system. Older adult care has traditionally been a family responsibility given the socio-cultural aspects of Indian society which reflect intergenerational reciprocity in the form of duty, love and *seva* (service) of the younger generation towards the older generation (Lamb 2009). According to Cohen (2000), the decline of joint family narratives is more relevant among middle class and elite individuals, but less extended to lower income families. Migration, changes in employment structure, and the influence of modernization values have weakened the level of care and support given to older adults within families, however the majority of older adults in India still reside in a traditional multi-generational living arrangement (Brijnath, 2012). According to the International Institute for Population Sciences et al., (2020) two-thirds of Indian older adults aged 60 and above live with their children.

A few studies conducted at the regional level have identified a range of reasons older adults change residence. Old age vulnerabilities such as health issues and the need for assisted living (Field et al., 2005) as well as poverty, loneliness after the death of a spouse, and migration of

children (Panigrahi & Syamala, 2012) each necessitate the need for care services outside the home. Additionally, an older adult's wish to lead an independent life increases the demand for care homes. Kalavar and Jamuna (2011) identified childlessness and widowhood as important reasons to shift place of residence. Panigrahi and Syamala (2012) identified family conflict, poverty, and ill health as reasons to shift place of residence. Another study by Irudaya Rajan (2002) pointed out that older adults were motivated to change residence because of an absence of caretakers at home, the migration of children, and a desire to live independently. Additionally, a sense of abandonment, physical or emotional abuse, and a lack of non-kin caretakers also pushes older adults to seek more 'secure' living arrangements in care homes (Clark, 2019; Kalavar, Jamuna, & Ejaz, 2013; Sebastian & Sekher, 2018). Nonetheless, for many senior citizens this is no easy task; difficulties in a new care setting motivate older adults to seek safety in a new residence (Jamuna, 2003). According to Lamb (2009), incidents of abuse at care homes are not infrequent. As a result, negligence and abuse likely increase the tendency of older adults to continue to seek safe living spaces (Jahangir et al., 2018).

The State of Kerala, where this study is conducted, largely depends on remittances due to large international migration since the 1980s (Zachariah & Rajan, 2012). A recent study shows that there are 2.1 million emigrants from Kerala across the world; it is estimated that nearly 10 percent of the population of Kerala lives outside of the state, in various parts of India, and abroad in the Gulf region, the United States, and Europe (Rajan & Zachariah, 2019). International remittances comprise 31 percent of the state's domestic product. As international migration grows, older adults are often left alone without co-residing caregivers (Ahlin & Sen, 2019; Jahangir et al., 2018; Ugargol & Bailey, 2020; Zachariah, Mathew, & Rajan, 2000).

3.3 Context of the research, study methods and the study population

For this chapter, data were collected from all the three care homes: Prasanthi Bhavan, Trinity, and Sahya. Prasanthi Bhavan is the care home for charitable purposes; Trinity is the faith-based care home for the middle class; and finally, Sahya is the for-profit care home for the upper-middle class (please see Chapter 2 for a description of each care home).

3.4 Data collection

With the objective of obtaining rich data on the diverse pathways used in seeking residence in care homes, we employed the following data collection techniques.

3.4.1 In-depth interviews

The aim of the in-depth interviews was to collect rich information about the life history and current experiences associated with different places and homemaking practices of older adults currently living in care homes. During in-depth interviews, we applied the life history technique to map the pathways research participants had pursued to arrive at their current residences. We conducted 41 semi-structured in-depth interviews with 37 older adults and three caretakers between April and December 2015. At Prasanthi Bhavan, a total of 17 interviews were conducted with 15 residents (ten females and five males) and two caretakers. At Trinity, 13 interviews were conducted with 12 residents (seven females and five males)

and one caretaker. At Sahya, a total of 11 interviews were conducted with residents (seven females and three males) and one caretaker (see participants' profile in Appendix I).

3.4.2 Observation

In addition to in-depth interviews, much information was collected through observation as interviews alone cannot reveal the attitudes and the behavioral changes of care receivers nor caregivers. This research method also helped to triangulate or cross check the information that was shared by the participants in their interviews on issues such as behavior towards each other. Both the physical setting of the care homes as well as the activities of older adults within the care homes were observed. The personal rooms and their facilities and arrangements were also observed. These observations were noted down in a field diary during fieldwork and incorporated while explaining the research context.

3.5 Participant recruitment

Participants were recruited with the prior permission of the three care homes. In order to obtain permission for the study, a written request form was submitted to the supervisory board of each care home. Since the management of Sahya and Trinity are very careful to maintain resident privacy, it took several visits, phone calls, and email communication to obtain permission for the study. Before starting the first interview, three visits were made to each institution to build a rapport with the older adults. Later, permission was sought from each research participant (both older adults and caregivers). Participants who were sick and could not give consent were not recruited. Before each interview, participants were informed about the research and consent was obtained.

3.6 Data analysis and emerging themes

Interviews were conducted in Malayalam and later translated into English. ATLAS.ti 7, a qualitative data analysis software package, was used to manage data analysis. Following Hennink, Hutter, & Bailey (2011), two cycles of coding were applied. In the first cycle, we remained close to the text. In the second cycle, we grouped the codes to create the following themes: 'Pathways of older adults,' 'Reasons for changes in place of residence,' and 'Factors influencing the decision-making process.' Finally, we employed secondary codes. The data presented in this chapter derive mainly from the interview data.

The theme 'Pathways of older adults,' comprised of different codes, refers to the various places older adults have lived. These include places at the micro-level such as homes, hostels, and care homes as well as at the macro-level such as cities and countries as a result of migration and return migration (see Table 3.1). As the older adults have experienced a series of changes, the theme 'Reasons for changes in place of residence' comprises various codes used to identify the motivation or reason for residence changes. The theme 'Factors influencing the decision-making process' is comprised of various determinants that have influenced the decision-making process and so set the direction of pathways (see codes in Table 3.1).

Table 3.1. Themes and codes identified

Themes	Codes
Pathways of older adults	Places lived; migration; return migration; home; rented house; ancestral home; occupation-related place; hostel; religious place; care homes
Reasons for change in place of residence	Abuse; loneliness; linked movement; death of spouse; quest for independent living; change in care relation; changes in family value; health issues; migration of children; need for care
Factors influencing the decision-making process	Education; income; work; autonomy; gender and power relations; culture; norms; influence of family; influence of relatives; roles of non-family members; influence of religious leader; role of community leaders; role of government official; influence of others

3.7 Results: Pathways to care homes

Among the 41 research participants, 37 were older adults and four were caretakers (see the participants' profile list in the Appendices). In general, care home lodgers shift through multiple residences before reaching their current places of residence. Older adults belonging to the higher socio-economic group play a greater role in the decisions about where they live while older adults from the relatively lower socio-economic group play a lesser role—or none at all—in the decision-making process. Instead, family members, neighbors or local government officials are often the prime decision makers regarding the choice of care home. In addition to income, other factors play a crucial role in the decision to enter a care home including marital status, rules of inheritance, family disputes, migration, social isolation, abuse, and violence.

We present the findings in three distinct pathways (see Figure 3.1). Each pathway features a different type of mobility pattern. Starting at the family home, older adults moved: 1) directly to a care home; 2) to different living arrangements prior to the current care home; and 3) to various other care homes before residing at the current care home. These trajectories additionally provide insight into the decision-making processes the older adults face in search of a safe place to live.

To map these pathways, we applied a life history technique during the in-depth interviews. The narratives collected from the older adults showcase elements of care, agency, family migration, and gender inequalities that illustrate not just the experiences of the individual, but certain patterns that were recognized by a range of participants in our study.

Figure 3.1 Pathways to institutional care homes for older adults in Kerala

3.7.1 Pathway 1: Home – care home

The first pathway, *Home to care home*, is common across all three study sites of Prasanthi Bhavan, Trinity, and Sahya. However, the complexity of the decision-making process is entirely different across all three settings. Our empirical data show that older adults residing in Prasanthi Bhavan are more dependent on others, and especially on non-family members. Older adults from Trinity and Sahya experience more autonomy in making choices but the process nonetheless involves family members. Elements of autonomy are more common among the older adults at Sahya than at Trinity. The below quotes provide illustrative examples of both the *Home to care home* pathway and the decision-making process involved.

At the time of data collection, Meenakshi resided in Prasanthi Bhavan. She had a son and a daughter. She worked in a paddy field until she had an accident. When asked how she came to live at the care home, she stated:

I had a road accident... I am partially blind now. It might cause trouble for my family. Nobody is at home once they all go to work. Rajamma [a village council member] took me here. It's more convenient... I didn't know about any of this [care home] before coming here. I came to know all of this only because Rajamma brought me here (laughs). She said I will take you to an old age home. And then brought me here. She signed the papers. She said it's all good. There is no problem for food, no trouble in bathing, washing and such. She said so. She said that I should stay here.

Meenakshi's experience reflects the role of someone outside of the family, in this case a local political leader, in the decision-making process of changing place of residence and ensuring the wellbeing of an older adult belonging to a lower socio-economic group. Meenakshi perceived that her family had no role in the decision as there was no discussion with her son or daughter. In addition, she was not aware if a discussion between her family and the local

government member took place. Existing poverty in the family and a sense of helplessness also motivated older adults to trust local leaders. For example, many residents of Prasanthi Bhavan depended on non-family members in the decision-making process, including local community leaders, government officials and friends.

Older adults in Sahya and Trinity are economically independent and so are able to exercise more agency in making choices; decisions were taken collectively within the family. Philomina, a retired teacher, resides in Trinity with her husband. They have four children who reside in the United States. When asked how they arrived at the care home, Philomina stated:

We find it difficult to do things [at home]. Otherwise, we should get good servants. Don't we need sincere servants? It's because of the lack of such people and the difficulty to live alone that we are living here. We thought that if we live here for some time, it will give us some happiness... Living here was our children's idea... When they come here, they also can live here with us without much hassle. They won't have to handle homely affairs. They think we live here for their convenience too.

For older adults at Sahya and Trinity, the migration of adult children led to various challenges including health issues, loneliness, and difficulty in obtaining domestic help. Additionally, the wish to lead a religious life also motivated older adults in these care homes to change their place of residence along the *Home-care home* pathway. Friends and religious leaders were also involved in the decision-making process. Paid care homes such as Trinity provide accommodation for international migrant children when they visit their parents. Here, decision-making is based on level of convenience and receiving care in a secure environment. Given the choice and the ability to hire caregivers, this group would have preferred to stay in their own homes.

Having resided and engaged in paid employment outside of Kerala or India, older adults in Sahya are economically independent. Our empirical data show that one of the main motives to shift to a care home is the desire to live independently. For example, Omana resides in Sahya; she spent most of her working life as a teacher in Mumbai and Hong Kong. When her husband retired, they settled in Kerala. Because Omana's husband was very fond of rural life, they purchased a small estate and built a house on 6.5 acres of land in a hilly area of the Idukki District. Omana continued her life with her husband until his sudden death. After his death, she moved to the US for a short while with her daughter. She stated:

After he [her husband] died, my daughter took me away to the US. And I came back, in the meanwhile my daughter-in-law needed me to stay with her. I told them that I wouldn't live with them. I wanted a place of my own. They wouldn't let me stay alone in Peerumedu [home].

Although Omana's children wanted her to stay with them, she wanted to live independently. As a highly educated and an economically independent older adult with international exposure, Omana enjoys a higher level of freedom in the decision-making process. She recalled:

My daughter-in-law found two or three places like this. We came and saw them; we all were very happy with this one. And I started staying here, not so long. It's been actually four months. I liked this place very much first because of its beautiful surroundings, it reminds me of my home, and I can go occasionally there, and I have a brother who lives in Kottayam.

It is through the collective decision of Omana and her children that they finally decided to shift her residence to a care home. Omana and her family chose Sahya only after conducting direct visits for comparison with other care homes.

3.7.2 Pathway 2: Home – interim living arrangement – care home

For various reasons, older adults who have settled in a care home often first experience multiple shifts in place of residence. Family issues, poverty, abuse, rules and regulations of care homes motivate or force older adults to successively move from one setting to another. The following examples of Bhaskaran and Remani, living in Prasanthi Bhavan, show how lower socio-economic status and a heightened dependence on others increase the complexity of their pathways.

Bhaskaran was born in a poor family and worked as a day laborer. He has a wife, a son and a daughter. His troubled relationship with his family led him to move away from his home. Bhaskaran came to Prasanthi Bhavan with the help of his friend Sathyan. At the time of admission at Prasanthi Bhavan, Bhaskaran was working as a helper in a shop and telephone booth owned by Sathyan. When asked how he came to reside at Prasanthi Bhavan, Bhaskaran stated:

He [friend] said, let me try, he left the shop, telling me that he would try, and he came here [Prasanthi Bhavan], spoke with the superintendent and learned the formalities here. On that way, he went to meet the panchayat [the village council]. He told the president my whereabouts. Then he got the certificate from the president. He came to the shop and told me that I should accompany him to a place the next morning, where I can live then onwards. I did not ask where it was or what it was as he was a person I know. The next day, he took me here in his vehicle... It was only on reaching here that I came to know that there is an institution like this.

Bhaskaran had no role in deciding his place of residence. Bhaskaran's lower educational background and economic dependency on his friend led him to trust his friend's choice of residence. Before reaching the care home, Bhaskaran was not aware of Prasanthi Bhavan; he was staying with siblings and working as a shop helper during the day. When Bhaskaran was earning and economically-independent, he had more autonomy in the decision-making processes related to the type and place of residence. He became economically dependent when a sudden deterioration in his health resulted in job loss. Economic security plays a large role in both the decision-making process and in its execution, and health is one of the prime factors in maintaining economic security and autonomy. Health issues in older age prevent older adults from performing economic activities; health issues additionally add emotional,

physical, and economic vulnerabilities. Vulnerabilities in turn lead to decreased autonomy and agency so that the older adults must depend on others for the decisions which impact their lives.

Remani's experience shows the role of different government agencies in setting the direction of an older adult's pathway. Remani had only attained a fourth-grade education and was a victim of family negligence and abuse. Her husband was an alcoholic and physically abusive towards her. After her children moved to other cities and her younger son passed away, she did not feel safe at home as her husband continued his abuse. She also faced threats and abuse from her stepson. She eventually sought help from the police. As a result, Remani came to Prasanthi Bhavan from Mahila Mandiram, a care center operated by the Social Justice Department of the Government of Kerala. Based on an evaluation of a district probationary officer, police officials and the court, women above 18 years of age who need care can be admitted into Mahila Mandiram. When asked about her journey to the care home, Remani stated: *"I stayed there [Mahila Mandiram] for more than one year. Later they shifted me here [Prasanthi Bhavan]. Because I can't stay there for long periods—I am over 60"*.

Age limits of Mahila Mandiram necessitated Remani to change her place of residence. Government officials in Mahila Mandiram chose Prasanthi Bhavan as her next place of residence. Remani's efforts to involve the police in her home life led to a change of residence and so her wellbeing. Although the decision was largely determined by government officials, Remani's initial effort of going to the police reflects her attempts at self-determination and autonomy: her willingness and ability to fight against abuse and negligence at home. Similarly, other older adults in our study also showed agency by seeking help from neighbors, friends, and government agencies to find a care home which was safe and ready to accept them.

3.7.3 Pathway 3: Home–interim care home–to current care home

Older adults living in for-profit care homes also undertake multiple pathways: from home to interim care home and then the current care home. As these older adults are economically independent, the decision-making process is different from that of older adults living in non-profit care homes. The pathways of Pushpa, Thresyamma and Fr. Sunny, presented in the following paragraphs, illustrate the mobility experiences of older adults along pathway 3: from one paid care home to another paid care home. Each reflects the decision-making process which leads to a better life than the previous one.

Pushpa is a very religious woman living in Trinity. In her childhood she wanted to become a nun but the health issues she suffered during her school days and onwards prevented her from realizing her dream. She also disliked the idea of marriage. After a short career as a hostel warden in Mumbai, health issues drove Pushpa back home to Kerala where she was economically dependent on her brothers. Pushpa married Kurian at the age of 58. Kurian was a widower and retired pensioner and was also living in a care home. Post-marriage, the couple lived in different care homes before coming to Trinity: one in Kottayam and another one in Alappuzha.

We lived in an old home in Kottayam...For me, the food in Kottayam was very spicy. I got an ulcer. It [the food] was cold and spicy and the facilities were not good. We had to go out to attend holy mass. People weren't decent. They quarreled. Very noisy atmosphere. In Alappuzha [an old age home], there was a problem with the lift too. One day I got trapped in it. I got scared. Firemen had to be called for help. So, we decided to leave there. I forced him [her husband] to leave that place. I didn't allow him to use the lift either.

Pushpa wanted to stay in a care home before her marriage but her brothers did not allow it as they feared social sanction from the community. Pushpa was unmarried and economically dependent on her family; these gender and power relations within her patriarchal family completely prevented her from independent decision making. Pushpa's pathway shows that she had lived in different care homes. In different occasions, she had enjoyed different degrees of autonomy and agency. Each was associated with the socio economic, gender, and power relations she was embedded within.

Women in India and Kerala experience multiple forms of emotional and economic abuse across their life course. At older ages, their situations become more precarious when they are either abandoned or are disinvested of their resources by family members. At the time of data collection, Thresyamma was an 82-year-old woman living in Sahya. As Thresyamma was not married and did not have children, she was thrown out of her home by close relatives (her brother, uncle and sister-in-law) after the death of her father. She had been given only a small portion of the ancestral property and the rest of her inheritance was illegally transferred to her relatives. According to Thresyamma:

So I sold that [property] out and continued my life in rented houses in Ernakulam, Chalakkudy, Iringalakkuda, Maala, etc... Finally, when I found it difficult to live alone, I shifted to [care home] in Ernakulam District.

Thresyamma filed a petition in court to get her property back. She won the case, and per court order, her brothers' children had to take care of her at the same standard of living as her ancestral family. The experience of Thresyamma is however unique in the Indian context; not many older women have access to legal resources to fight disinvestment of inheritance.

Thresyamma was very happy in her first care home in Ernakulum. She recalled:

One day I fell down and I broke my leg bone, undergone an operation. I had very good time at Ernakulum. They treated me very well even when I had difficulties in walking after the operation. But I am very old. I am a Catholic. I wanted to see and have Holy Communion. So, I shifted to a place run by sisters.

In search of a more spiritual life, Thresyamma moved into a care home run by sisters. Ultimately however, she was dissatisfied with the management's behavior. Claiming that she was cheated by the administrative staff, she stated:

They insulted me. I jumped out of there. BLOODY LIARS said that I hadn't given them Rs. 10,000. I never lie. My dad never did. His dad too. I stayed there only three months. Then I shifted to another one.

Thresyamma then shifted to the second care home run by nuns. Similar to a convent, she was not happy with the behavior of the caretakers. She felt that the caretakers were negligent and that she was not getting due respect and attention from the caretakers. Thresyamma decided to relocate to the third care home in Alappuzha which was run by a Catholic person. Here food was delayed and her room, on the top floor, was hot and dusty in the summer months. These problems pushed her to look for another place. On her fourth attempt, she found Sahaya. Thresyamma was happy with the care she received at Sahaya; staff assist her whenever she wants. She used to go church every Sunday and attend mass

Similar to Thresyamma, the pathway of Father (Fr.) Sunny shows frequent changes in residence; Fr. Sunny lived in three different care homes within the last six months at the time of this study. Fr. Sunny settled in Trinity after serving 17 years as a priest in the United States. At retirement, he returned to Kerala to live with his brother. The sudden death of his brother's wife left no one to take care of the domestic work and with none to look after them, Fr. Sunny started to look for care homes. In order to maintain regular contact with his family and other relatives in his ancestral home, Fr. Sunny decided to stay in any for-profit care home near by his native place in Kottayam. He explained:

I stayed in [first care home]. Only for one or two months. Not even two months. There facilities were not up to my expectations. Then I went to [second care home] ... I left that too on account of the lack of proper conveyance to go to Punnathura [his ancestral home] ... Then moved to [third care home]. Three months. The unavailability of a good water facility forced me to get away from there. At last, I opted for here [Trinity].

Moving from one care home to another in search of better services is a new mobility pattern that reflects the growing tendency of middle- and upper-class older adults to depend on care home services. As services expand and more care homes, gated communities, and retirement villages become available, older adults will be able to make better choices around residence. To ensure older adults have a smoother transition to care homes, the Indian government also needs to provide clear guidelines on the standards required for setting up and managing a care home for older adults.

3.8 Discussion

When society stresses the strong cultural values of familization, it promotes the care and wellbeing of older adults within the family. In contrast, a society with culture of de-familization and strong universalization tends to have more welfare provisions towards care homes. Many societies are caught between these values and traditions and the reality of neoliberal work, careers, and the care economy. In addition to cultural values, social capital such as social ties and social networks play a large role in determining the quality of life and

wellbeing of older adults (Cannuscio, Block, & Kawachi, 2003). The wellbeing of older adults in homes (especially in developing countries) is primarily dependent on the socio-economic background and the nature of filial piety that exists between family members. A lack of, or reduction in, social capital due to life course events such as the death of spouse, the migration of children, health issues, and the non-availability of caregivers act as push factors for older adults to move into care homes.

The literature shows that government interventions and social ties play a large role in promoting the wellbeing of older adults (Cannuscio, Block, & Kawachi, 2003; Naumanen, Perista, & Ruonavaara, 2012). The pathway experiences of older adults taking part in this research show how socio-economic position, gender, and power relations influence the autonomy and agency of older adults. Older adults with lower levels of formal education and economic dependence have less autonomy and tend to depend on the decision-making choices of others such as family members, friends, and government representatives. Irrespective of the type of residence, unmarried and widowed women especially are at a disadvantage in the decision-making process. Linked household mobility is a very common practice among married women who live with their husbands in retirement homes. Life course events and the gendered position in the family alter the autonomy of a woman. As a result, some women find care homes to be spaces of increased agency and freedom from abuse and where they have more agency and control over their lives.

This study shows that the pathways older adults take towards care homes are not linear in nature but include different types and serial changes in place of residence. These pathways include multiple places such as homes, the homes and workplaces of relatives and friends, and care homes (see Figure 3.1). The involvement of international and return migration increase pathway complexity. The pathway history of older adults shows that autonomy and agency are interconnected with residence mobility. Compared to other older adults, women with higher education levels and better socio-economic backgrounds show a higher degree of agency and autonomy in the decision-making process. Though culture norms traditionally prefer filial piety (Lamb, 2009; Sung, 2001; Zhang & Goza, 2006), the ability to demand an independent living arrangement and move away from children and into a care home reflects the growing attitude among older adults. With higher levels of education combined with international exposure, these older residents opt to deviate from cultural norms of filial piety in a quest for individualization. Contrary to Indian societies' negative perception of care home life (Brijnath, 2012; Jamuna, 2003) older adults from the middle and upper classes prefer to enter paid care homes over home care services; this shows the onset of acceptance of formal care services and a growing demand for care homes in the future. The older adults currently living in paid care homes can be considered to be the first generation able to afford and wish for care outside of the home and beyond family ties. Similar to other studies conducted in India (Kalavar & Jamuna, 2011; Panigrahi & Syamala, 2012), this study identified various reasons for residence changes: older adults were motivated by poor health; poverty; destituteness; abuse and negligence from family; religious reasons; lack of or death of a spouse; and the migration of children. Finding a suitable place to reside is primarily linked with the socio-economic status of older adults. Often the decision-making process is not

individual but is instead influenced by family members, friends, and even government institutions. Older women, due to culturally defined gender norms, often migrate temporarily to other countries to provide care for their grandchildren (Chan, 2005). Gender roles and power relations associated with the patriarchal family system set the direction of change in place of residence. Unmarried and economically-disadvantaged women are more dependent on the permission of male members in the family to set the direction toward a new residence. Older adults from better socio-economic backgrounds enjoy more autonomy and so can identify a new place of residence prior to moving. In a new place, the wellbeing of older adults depends on how they adapt to new housing conditions (Hansen & Gottschalk, 2006). When new difficulties emerge at a residence, older adults with a better socio-economic profile and with higher autonomy are prone to locate a new residence. Finally, the linked movement of men and women is common practice among couples that reflects the gendered role of women in a patriarchal society.

3.9 Implications

This qualitative study is among the first to recognize the positive experiences of older adults living in care homes. We highlight the role of local community leaders and government officials, who by positively determining and directing pathways, promote the wellbeing of older adults in lower socio-economic strata. In addition to recognizing different living arrangement possibilities, government officials, police and local authorities have a significant role to play in protecting older adults, especially those who are very poor, neglected and abused. This study's findings contribute to the wider literature on care and care homes for older adults by highlighting the way differing pathways—and the complexities involved in these pathways—are an interplay of multiple factors including socio-economic background, culture, gender, and power relations. Furthermore, there is a dearth of information regarding the availability and accessibility of charitable care homes among poor older adults in society. Policy makers should give more attention to increasing awareness around the availability and accessibility of charitable care homes in society. Finally, policy makers should adapt mechanisms to monitor the operations of care homes in order to prevent abuse and negligence.

Chapter 4²

***“I feel that it (home) is orphaned”*: Role of cultural meaning system and place attachment in retaining home ownership while residing in retirement homes in Kerala, India**

² This chapter is an adapted version of the following chapter:

Pazhoothundathil, Nikhil., Bailey, Ajay., & Hutter, Inge. (Accepted), *“I feel that it (home) is orphaned”*: Role of cultural meaning system and place attachment in retaining home ownership while residing in retirement homes in Kerala, India. In Bailey, A., Hyde, M. & James, K.S. (Eds). *Care for Older Adults in India*, Policy Press, UK.

4.1 Introduction

Home is a place marked by many life-course events. When an older adult leaves home to live in a retirement home, their sense and meaning of home needs to be reconfigured. The shift in place of residence is likely to bring about changes in control over a place (home) and the sense of place attachment (Heywood, 2005). This is because home can often be the central place to constitute many wellbeing factors for older adults such as family bonds; care and care reciprocity (Ugargol & Bailey, 2020); domestic routines and rhythms (Lager et al., 2016); social relationships; religious and cultural practices (Bailey et al., 2008; Mazumdar & Mazumdar, 2005); life course events; material possessions; and memories and emotional investments (Cristoforetti et al., 2011). Home is embedded with memories, self-identity, a sense of security, cherished possessions, and family relations. In the Indian cultural context, older adult care is generally seen as a duty of adult children, which means the primary care giver is usually the daughter-in-law (Liebig, 2003). A series of changes such as urbanization and industrialization have increased work force participation of all members of the household. This, coupled with the migration of children, results in the non-availability of caregivers within the household (Nair & Kumar, 2017). As a result of these changes, formal care services for older adults have begun to receive considerable attention, especially in urban areas. Institutions providing geriatric care, such as old age homes, have become a source of formal care services as an alternative for traditional informal care services (Bhattacharyya & Chatterjee, 2017; Gupta et al., 2014; Kalavar & Jamuna, 2011; Mayer, 2017; Pathania et al., 2019). According to Müller (2019), the relocation of housing is a complex decision-making process as a change in housing environment allows older adults to self-reflect and regulate emotions. Unlike the western context, this study shows that older adults who live in for-profit care homes make an effort to retain and maintain their previous homes as home is culturally as well as emotionally relevant in an older adult's life. This paper focuses on the following questions: What motivates older adults to retain their (previous) homes while currently residing in retirement homes? How do older adults maintain their previous homes? And how are these motivations linked to a sense of place attachment?

4.2 Ageing and institutional care

The study is based in Kerala, India. India is the second largest populated country in the world with more than 1.21 billion people (Registrar General of India, 2011) of which are a large number of older adults. This population sub-group is expected to grow in absolute and relative base (Balachandran et al., 2020). According to the last census (Census 2011), 8.5 percent of the total Indian population are older adults (aged 60+) (Registrar General of India, 2011). In 2015, the share of older adults in India was nine percent; this figure is expected to grow to 10 percent in 2020, to 20 percent in 2050, and to 33 percent by the end of this century; the oldest age group (80+) is expected to grow faster than any other (United Nations, 2019). As per Census 2011, the proportion of older adults (60+) in Kerala is 12.6 percent (Registrar General of India, 2011). Among the Indian states, Kerala is the fastest aging state with the highest index of ageing with 97 older adults per 100 children (Subaiya & Dhananjay, 2011).

As per the traditional Indian system, the last two of the four *Ashramas* (or stages of life)—*Vanaparasta* and *Sanyasa*—are connected with old age. In the *Vanaprasta* stage (retirement),

life is marked by a transition phase towards spiritual life where a person has handed over household duties to the next generation. In the *Sanyasa* stage (renunciation), the last stage of the *Ashrama* system is marked by the renunciation of material desires with a more specific focus on spiritual life (Mazumdar & Mazumdar, 2005). So, leading an old age life with fewer responsibilities and expectations, can often be seen outside the home to be a culturally validated phenomenon following Indian tradition. According to Izuhara (2000), the residential choices of older adults are influenced by family tradition and social norms. In contrast, the concept of a formal care system, with special focus on poor and homeless older adults, was introduced by colonial administrators and missionaries during the 18th century. Compared to previous decades, institutional care services for older adults are now receiving considerable attention and importance. Even though in India only a small proportion of older adults use institutional services, the tendency to seek out institutional services is growing; a higher demand for geriatric care institutions is expected in the coming years as society moves towards further socio-economic and demographic changes. According to a UNFPA study conducted in seven major aging states in India, six percent of older adults stay alone while 16 percent stay with a spouse (UNFPA, 2011). India as a country is heading towards an advanced aging scenario and is likely to expect an older adult population in terms of absolute numbers. This increases the need for formal care services for these older adults. Studies show that old age homes are mostly concentrated in regions leading in population aging scenarios (HelpAge India, 2009; Johnson et al., 2018; Nair & Kumar, 2017; Samuel et al., 2016). According to Help Age India (2009), 14 percent of the total number of old age homes in India are in Kerala; the state is characterized as a demographically leading state having 12.5 percent of the older adult population (Registrar General of India, 2011). According to the Social Justice Department (2019), there are a total of 614 care homes registered in the State of Kerala; this figure includes 599 non-government care homes (which include both non-profit and for-profit care homes) and 15 government care homes.

4.3 Home and cultural meaning system

The concept of home has been extensively used in the literature in connection with theories of place attachment and place identity where place attachment is connected between person and place and place identity is concerned with the process of forming places as part of self-identity irrespective of qualities and evaluation of places (Moore, 2000). Home is the place which satisfies people's psychological as well as physiological needs (Maslow, 1955). Based on the literature on the meaning of home, Clapham (2011) argues that the wellbeing of a person is associated with identification and embodied activities. So, in order to promote the wellbeing of older adults, both the physical or material world as well as the social world play a significant role. Place attachment occurs at both the individual and group levels. At the individual level, attachment is connected with personal memories, personal experiences, and gains. This kind of place attachment is helpful to bring a stable sense of self (Scannell & Gifford, 2010). According to Easthope (2004) a place (or home) is constantly linked with the physical, social, cultural, and emotive world. The meaning of home and its material function change according to the changes in life stages of older adults. A study on older women living in congregate houses (Leith, 2006) reveals that older adults, able to conceptualize and

evaluate their life situation in response to their environments, try to make a rational judgement according to the available resources and environments.

Any disruption in the physical, social, cultural or emotive attributes will affect the wellbeing of older adults. When any such changes occur, older adults are likely to adopt coping strategies to mitigate the effects of the change (Cristoforetti, Gennai, & Rodeschini, 2011). In a study on older adult widows, Cristoforetti and colleagues found that, in response to loneliness due to the loss of a spouse, older adults use coping strategies such as relocation and personalization of possessions in order to ensure a sense of continuity and psycho-physical and social wellbeing. According to Coolen (2008, p. 200), “the meaning of dwelling is believed to lie in the relationship between the features of the dwelling on the one hand and people’s goals and intentions on the other.” For example, Hansen & Gottschalk (2006) found that changes in the life stage of older adults, in terms of shrinking of household size and poor health, motivate older adults to seek a better dwelling place. Through a dialectical perspective, place attachment is involved in ‘movement and rest’, and inward and outward aspects. The inward aspects of a place refer to being part of a place, such as home, where individual and familial relations take place and are separated from rest of the world. Outward refers to the external world. Similar to interpersonal relationships, place attachment is maintained through proximity-seeking behaviors where the closeness of places provides a sense of safety and comfort, if the place is positively constituted. If the place-proximity is not possible, it can be achieved through symbolic representation (Scannell & Gifford, 2014; Smith & White, 2004).

The meaning of home varies according to culture. In India, home is considered to be the central place to perform various ‘seva’ (care) or culturally-bounded duties and services that fulfill intergenerational care expectations and obligations. During adulthood, an adult couple is primarily responsible for taking care of their children. When the adult couple age, they are supposed to be cared for by their children. According to Mayer (2017), expectations about ageing are culturally shaped and influence the way people organize their daily life and social bonding. The transfer of family property from older adults to the next generation is considered to be an important life course event that is driven by social and cultural norms and one that marks the fulfillment of familial obligation. It has been argued that individual reasoning, perceptions, and interpretations are derived from cultural schemas (D Ándrade, 1992; de Haas & Hutter, 2019; Vaisey, 2009). Cultural schemas are shared and also shape individual perceptions, beliefs, attitudes and expectations (D Ándrade, 1992; Strauss & Quinn, 1997). Cultural schemas are hierarchically organized and have the ability to instigate action. According to Strauss & Quinn (1997), “when the cultural belief becomes a part of inner sense of a being they become goal driven and acquire motivational force” (p.26). Higher-level-schemas, which function as goals, are considered to have high motivational force. Middle-level and lower-level schema generate goals in interaction with higher level schema (D Ándrade, 1992). Cultural schemas are divided into the following four major functions: representational; constructive; evocative; and directive. The representational function involves defining knowledge and beliefs about the world which helps individuals to orient themselves in a social world. The constructive function involves creating cultural entities to which people adhere. The evocative function involves evocating feelings and emotional reactions. Finally,

the directive function involves the need or obligation to do something (D'Andrade, 1992). For older adults, the motivation to retain and maintain their home for the next generation is driven by the cultural schemas of 'age role expectation' or 'care obligation' (Rutagumirwa, 2018). Fulfillment of the care obligation brings a sense of satisfaction. Additionally, schemas such as love, nostalgia and pride also motivate older adults to retain their home which in turn helps to maintain place attachment.

Various studies emphasize the importance of possessions in later life in promoting a sense of continuity, comfort, and security (Coleman & Wiles, 2020; Cooney, 2012; Meijering & Lager, 2014; Pazhoothundathil & Bailey, 2020; Sherman & Dacher, 2005; Stevens, Camic, & Solway, 2019). According to Seo & Mazumdar (2011), the use of cherished possessions is culturally embedded. The authors further emphasize the importance of cultural values, traditions, and preferences in older adults' life, especially when they are in a displaced space. In this study, the practices of retaining a previous home while living in a care home reflects that home itself becomes a possession for older adults. In this study, we look at how cultural schemas—or the cultural meaning system and emotions—motivate older adults living in care homes to retain their previous home as well as the different strategies older adults use to maintain their homes.

4.4 Data collection

We applied in-depth interview to obtain rich information about the life history and life experiences associated with home and place making practices of older adults at retirement homes. In-depth interviews help to: (1) gain detailed insight into the research issues from the perspective of the study participants; and (2) understand the socio-economic and cultural contexts in which people live (Hennink, Hutter, & Bailey, 2011). Between August and December 2015, 24 in-depth interviews were conducted with 22 older adults and two caretakers. Semi-structured and in-depth interview guides were employed. The interview guide was prepared in English and translated into Malayalam, the local language. Interviews were conducted in the personal room of the older adults. Each interview, conducted up to the point of data saturation, lasted approximately one and a half hours.

4.5 Data analysis

The interviews conducted were in Malayalam and later translated into English. ATLAS.ti.7, a qualitative software package, was used for data management and analysis. For analysis we adopted broad principles of grounded theory (Charmaz, 2006; Glaser, 1978; Glaser & Strauss, 1967; Strauss & Corbin, 1998) which involved various stages such as developing and defining codes and code data as well as describing, comparing, categorizing, conceptualizing and developing theory. Two main cycles of coding were applied (see Table 4.1). In the first cycle of coding, primary codes were developed both inductively and deductively. Primary codes were developed through the line-by-line coding of each data set which enabled the researcher to stay as close as possible to the data. In the second cycle, code families, themes or categories were developed by grouping different primary codes based on common attributes guided by the research questions. From the primary codes that emerged, we focused on code families for 'Emotional attachment towards home,' 'Reasons to leave home,' 'Older adults'

strategies to maintain their homes,’ ‘Attachment to things and places’ where we employed secondary codes. The data presented in this paper mainly come from interview data.

Table 4.1. Themes and codes emerging from data

Theme	Codes
Emotional attachment towards home	Ancestral home; care-taker; family property; missing home; feeling happy; connect with native; interpersonal relationship with neighbors; ownership; place attachment and memories; place and role; pride; place wanted to stay
Reasons to leave home	Changes in care relations; changes in family values; changes in norms; death of spouse; changes in meaning of place; feeling insecure; feeling lonely; free from household work; health issues; need for care; retired life; lack of assistance
Older adult’s strategies to maintain homes	Caretaker of family property; condition of home; elements of fictive kinship; interpersonal relationship with extended family members; interpersonal relationship with neighbors; proximity of possession; visits own home
Attachment to things and places	Material possessions and interpersonal relationships; place and memories; pets; cherished possessions; possessions at home

4.6 Results

4.6.1 Current living situation

The older adults living in Trinity have primarily worked in India, especially in governmental sectors; most are economically independent as most receive their own or a spouse’s pension. The spiritual way of life, associated with the Catholic faith, was one of the important features that motivated older adults to select this particular home for their life in retirement. Trinity is situated close to a hospital and only accommodates older adults who are able-bodied as there are no nursing care facilities. This retirement home is surrounded by a wall which has wordings from the Bible. Inside Trinity, common places are depicted with the pictures of Jesus and other religious figures. The head, as well as the prime administrator, is a Catholic nun. Though she is relatively younger, the older adults call her ‘mother.’ Each day starts with a mass at six am followed by two prayers at noon and six pm in the evening. Besides this, older adults pray in their rooms. Community prayer time and dinner time are the main occasions for older adults to meet each other. Playing cards is the main leisure time activity of a few of the older adults. As most of the older adults have emigrant children, they used to travel abroad occasionally to spend their time with children. There is a separate time for visitors. Older adults are free to visit their homes and relatives but it is recommended that they return before the commencement of evening prayer at six pm.

Sahya, the secular retirement home, has many more facilities including air-conditioned rooms, Wi-fi, a garden, a library, and other services. This retirement home accommodates both the able- and non-able bodied as they have the facilities and staff for nursing care services. Compared to other institutes, Sahya is considered to be more luxurious as most of the

residents are retired and return migrants (see the participants list in the Appendices). Since a few of the older adults are US citizens, they receive a social security pension from the US. Though each room has separate television facilities, some older adults prefer to watch movies in the common TV room. This then becomes an occasion to meet and share time with other older adults. As the older adults place more importance on privacy, visits to other rooms are less often reported. Common meeting points are the garden, the TV rooms, the corridors, and the dining hall. The celebration of birthdays is a common practice, in addition to the celebrations of festivals such as Onam (a regional festival), Christmas, and New Year. While some older adults have their own cars, the retirement home has its own car and driver which can be used by the residents. There are no restrictions around visitors. Older adults are also free to go outside the retirement home and return, which enables them to occasionally visit their homes. Older adults use modern communication technologies such as Skype and WhatsApp to communicate with children living abroad, and with friends.

4.6.2 Cultural obligations and emotional attachment towards home

Nine out of 12 participants in Trinity nine and six out of 10 participants in Sahya retain and maintain their earlier houses while residing in care homes. The empirical results of the study show that there are two main motivators for older adults to retain their homes. One reason is that older adults have a cultural obligation to retain their home for the next generation. Another reason is that older adults are emotionally attached to their homes in various ways. For the older adults, home was not just a shelter, but is embedded with memories and roles. Home is also often a part of their identity. For the older adults, home is a central place where interpersonal relationships are maintained within the household (e.g., with husbands, children and parents) and with people outside of the household such as neighbors. For example, Mary stated:

When I went there yesterday, a special feeling passed through me. I became very happy [...] The plants have grown into big trees of fruits and herbs now. They were planted by my husband. Sometimes I collect the fallen fruits on the ground and take them with me here (to Trinity)[...]. Nowadays, all of them have built huge mansions. Our home was the only big house there years before.

Home and its surroundings are filled with memories of the family members (both deceased and living) such as husbands, parents, siblings and children. Given the right kind of support (social, physical and daily needs), the older adults we interviewed would have preferred to live in their own homes compared to a care home. This preference is rooted in their emotional attachment to the home and the memories it encompasses. Compared to men, the women in our study were more vocal about their emotional attachment to previous homes; older women in their past bore a larger proportion of domestic tasks and provided to care to the family. According to Elsamma:

I used to grow some crops like tapioca and coconut. I was actually hesitant to leave home. My three kids, my husband[...] their souls rest there. But I was forced by everyone. Yet, still I've to take care of my home, no!! [...] it's quite difficult to leave

one's home forever, right! To leave them, to see things decaying, to lose our property. Still, everyone asked me why and for whom I should cling on to that home all alone... Yes, I miss my home [...] I can take care of the affairs there [home], and maintain my small farm. I never get a minute to make myself sit down for a moment there [home].

Home is also associated with place identity, family roots, and a sense of pride; the transfer of home ownership to the next generation alone will not fulfil familial obligation. Especially in the context of international migration, older adults perceive that it is their cultural and familial obligation to retain and maintain the home for the next generation as home could act as a source of pride, place identity, and potentially could motivate migrant children to return to Kerala.

I feel very bad about leaving my house in which we lived for long and living here (care home now). The house is deserted or else it should have been safely given to someone to look after. So, I feel that it [home] is orphaned. I am sad about it... If our son is here. Suppose one day if he wishes to come back from America. We want to preserve it for him and grandkids even though they won't come. One day our grandkids can say they have their home in India. They can be proud of it.

For some older adults, home is important because of the painstaking efforts they had to take to build the home. Even though ownership status was transferred to the next generation, older adults felt greater attachment towards a particular home because they constructed it with their own earnings. They look upon their home as their child. Many of the older adults had invested their lifelong economic savings in these homes. This was described by Nainan who stated:

"Of course, the house at Madras... There were two houses. I had one built for each child. Then the son in America said he doesn't need a house. So, we sold it. And one is remaining. Another son and family stay there. It was I who had constructed the house. Like a mother give birth to her baby, I had gone through various pain and struggles to make it. I delivered my home, like a mother. Ha ha. So, there I have more attachment to them.

For an older adult such as Omana, who has lived most of her life outside of Kerala, home and its immediate surroundings have helped her to reconnect with her identity after returning to Kerala. It is the respectful behavior of neighbors, the beautiful surroundings, and the concern shown towards her that make her feel more welcome. For most of her life, Omana was an urban dweller and was used to the anonymity the modernized metro cities bring to daily life. After the death of her husband and the migration of her children, she finds new bonds and attachments to a small village where her house is located.

On my birthday on March 1st in 1999, we moved to the house [...] And then, while we were residing there, we were on top of a hill. When we looked sideways, we could see many other hills stretching away. Such a beautiful place and we had such a beautiful life. On the second or third day, I just went out on the hill for a walk; there was a poor

house down there. One lady was standing at their gate. She asked me, “Amma [mother], what are you up to?” I replied, “I was going for a walk.” As I walked a little further, an old man asked me, “Amma [mother], where is your vehicle, do you want me to call a vehicle?” That moment, I will tell you, honestly, I thought, “This is my identity, this is who I am, I come from here, and this is my home.” It was such a strong feeling and it was such a happy feeling, because we stayed in Mumbai, we stayed in Hong Kong, we stayed in Ethiopia, and in all we hardly knew anybody. We don’t even remember their names and they don’t even remember our names. Now this is a person who knew me for two days and called me ‘amma’ [mother].

Home is the place embedded with various emotions such as love, pride, identity, and a sense of rootedness. Memories of people and events motivate older adults to retain their homes while they reside in retirement homes.

4.6.3 Reasons to leave home

Older adults prefer home as their first choice of residence over any other alternatives. We asked in the interviews about their motivations to leave their homes and choose a retirement home as their residence. Participants narrate a range of reasons such as lack of security, health issues, loneliness, the migration of children, discrimination at home, loss of a spouse, and elder abuse. For some older adults, it’s the cumulative effect of multiple reasons that motivated their decision to move to a retirement home.

When older adults feel that they are not getting the care expected from the family, they felt distressed. Sometimes this led to feelings of being discriminated against. Feelings of discrimination seem to be prominent among those older adults who were single and did not have any children. For example, Alice, an unmarried older adult, stated:

After my brother’s death, I stayed in my home for two years. My friends, who are nuns, told me it was not good to stay in my home. They thought that, because I am unmarried, problems might arise with my sister-in-law and her children. That I might be a burden to my sister-in-law. I should move to an old age home. It’s their way of thinking. I never thought like that at first. But after my brother’s death, after sometimes I felt uneasiness with my sister-in-law’s behavior. Once we went to visit a relative, she [relative] wondered who will take care of me when the time comes. I took care of my parents. My sister-in-law and her daughter kept quiet. They could have said that, they will [take care of me]. It could have been just said [...] [but] they didn’t. I noted that. So I decided to come here. Such occasions. To be frank, I felt discriminated against. I haven’t said this to anyone.

Living alone at home is determined by the ability of older adults to remain in the home and in safety (van den Hoonaard, 2009). Older adults perceived it unsafe to stay alone at home because of security reasons. Since incidents are taking place in Kerala, such as atrocities against older adults who stay at home alone, and such news gets more media coverage, older adults perceive the need for a secure place. During data collection, older adults mentioned that

older couple have been murdered and robbed while staying alone at home in nearby villages. They also read in newspapers about these incidents in and around Kerala. For an example during the fieldwork, we found these news reports: The Hindu, a widely read daily newspaper, reported on January 22, 2015 a migrant laborer, who stayed at a deceased older adults out-house, murdered an older adult couple in Pathanamthitta District. Another paper, 'Madhyamam,' reported on 10 July 2015 that "Balan (65) and Santha (62) were found dead with stab injuries at their residence at Perambra around 8.30 pm on Thursday. A police source said the accused committed the crime while he was attempting to loot." Such horrifying incidents motivate older adults from middle- and upper-class backgrounds to move to retirement homes. This was described by Molly who stated:

My only daughter left [home] after her marriage. After that, I also stayed there [home] for some time along with a servant, then I fell ill. Ah.... its chikungunya. After that we could not find a servant for some time. We have some difficulty in getting a servant?... Then how can we live alone. Then I slept alone for a few days. A neighbor used to come at night for company. She doesn't have a husband or children. Then the two of us [...]. we leave the lights on till morning. Because, we now read such things in the paper. The thieves and the murder. So, then our fear is over our life.

Sometimes, the cultural norms associated with marriage and preferred place of residence led to older adults living alone at their home. For example, the case of Mathew: though he had three daughters, none of them or their husbands are ready to stay with him. As per Syrian Christian cultural family norms, after marriage the girl should stay at the husband's home to take care of her parents-in-law. Cultural norms of adoption in a Syrian Christian family allow parents who don't have a son to adopt a son-in-law and family and retain residences. As Mathew's all three sons-in-laws are also the only sons of their own parents, the possibility of adoption however was not possible. Mathew stated:

Let me explain. I've got three daughters. There's a custom of adoption. Here, the son in-law will be adopted by the family of the daughter after the marriage. That is, instead of sending the daughter to the husband's home, the son in-law is supposed to stay at the wife's family, after marriage. That's followed in the absence of a son in the family. But all three of them disagreed with this system. All of them were the youngest in their families. So, the boys were not ready to leave their families. Some sentimental feelings, you know. We stayed at home. We [with his wife] prayed, again prayed and finally took a decision.

Mathew also felt that he has no special attachment towards his home, though his daughters, grandchildren, and relatives felt that their ancestral home needs to be maintained. The ancestral home is the pride of the family members. These expectations also put additional pressure on the older adults to retain and maintain their ancestral homes. Mathew added:

Seven years ago, when I left my home and sold my property, everyone blamed me that I did some kind of foolishness, that I don't love my family. My children and

grandchildren were actually sad about this. And they won't find their mother's house there anymore. I told them, that there's no need get sentimental about it. At the time of our departure, we must leave behind whatever we have. We won't take anything with us. My cousins blamed me. I ruined Tharavad [our ancestral home]. They were also born and bought up there.

Health related issues also motivated older adults to leave their homes. Severe health issues such as heart attack or stroke, which happened at home, made the older adults to think twice about staying alone at home. Since there is no one to co-reside with at home, they found it difficult to reach a hospital in time. So, the older adults fear that their life is at risk if they continue staying at home. When a husband shifts his place of residence, the wife also moves with him to the retirement home. This was described by Theresa, who stated:

No, he wasn't so happy at first. He was a little sad because that house belonged to him. So, it was not so easy to give up so soon. One incident took place when we were at home. My husband fell ill. We were alone [...] they [the neighbors] were not always available. So, it was very difficult for us to get help from them. As we called them for help, they'd find reasons to avoid us. I called four or five of our neighbors. None of them responded. Finally, Achayan [her husband] drove himself to the hospital. We survived that day. It led us to decide that living alone wouldn't work out so well.

Aging, changes in household roles and feeling unsafe pushed people to seek out other residences. For example, Ninan, who was once the head of the household, felt lonely at home after his wife's death. Being alone at home, he had the feeling that he was becoming a watchman at home. Additionally, misunderstandings with his daughter-in-law further motivated him to leave home and stay at a retirement home near his native place so he could remain close to his siblings and other relatives.

It was only after my wife died and I became lonely that... I felt so. Yet I lived alone for some 7–8 years. Then as I got older, as I reached 80–85... It could be anytime. Then in emergency cases... How many people die alone! My own father-in-law, he was at home, alone, and when the children came home, he was lying there, dead. How many such incidents take place? Then, thieves. The problem of thieves... We are sitting alone... To think so, the situation has come to this. To live alone after wife dies ... If they [his son and daughter-in-law] leave at eight am, they only come back at five. We sit alone, bored at home, then thief come and murder us [...] She [the daughter-in-law] likes to have me stay there [home] only. Then I can be a watchman for the house [laughs]. Is it any different from being a watchman? Having an old man... With her, such a slight misunderstanding [...] There's another thing, I have allergies. A dust allergy. There in Madras, dust is increasing day by day [...] So, considering it all, here is a secure place to be.

Older adults who have lived abroad are exposed to new living arrangements. The values of independent living and a focus on individual wellbeing also motivate older adults to choose retirement homes instead of living with their children. For example, Omana does not want to

stay with her daughters as she wants to live independently. At the same time, she is old and not able to stay home alone. Her children, being concerned for her safety, recommended that she stays at a paid retirement home. So, it's the collective decision of the entire family.

After he [her husband] passed away, my daughter took me away to the US. And after I came back, in the meanwhile, my daughter-in-law needed me to stay with her. I told her that I would live alone. I wanted a place of my own. They wouldn't let me stay alone in Peerumedu [her home]. So, we had to lock it up at Peerumedu.

These narratives show that there are a range of reasons older adults leave their homes. The death of a spouse, the migration of children, or cultural norms regarding the place of residence after marriage initially kept older adults alone in their homes. This intensified the feelings of being alone and in turn created a sense of insecurity. Health issues and the quest to live independently also motivated older adults to leave their home and to reside in a retirement home.

4.6.4 Older adults' strategies to maintain non-resident homes

Older adults residing in retirement homes take a range of efforts to maintain or care for their non-resident home. Methods used to maintain homes included: (1) renting the home; (2) allowing a trusted person to reside rent-free in the home; (3) visiting often to take care of the house; (4) asking relatives or neighbors to care for the home; (5) appointing caretaking staff; and (6) transferring ownership of the house to very close blood relatives (e.g., siblings, nephews and nieces or other extended family members).

Since older adults are especially concerned about their homes, they want a trusted person to take care of their homes. At the same time, older adults who had bad experiences with a person who rented their home later allowed a trusted person to stay at their home, free of cost. The influence of religious leaders, family, and friends is a crucial element in this decision. Older adults were always concerned about how to protect their homes. One of the strategies is to temporarily give their home to others without rent. Since it is not for monetary benefit, they usually give it to a trusted person.

For example, Pushpa and her husband rented their house for an initial period. Later they found that the person was not properly maintaining their home. Based on the recommendation of a priest from their church, they later gave it to a group of nuns. Now they are happy that the nuns are looking after their home.

The house is in the custody of nuns. They will keep it clean. Now it's not for rent. First it was rented but they used it roughly and the maintenance was costly. Nuns who came in service of the church were searching for a home. The priest [the congregation priest] recommended it. It's for two years. Now they are living there. Sometimes he [her husband] goes there.

For those older adults who have rented their home, it is not the monetary benefit that is important but the assurance that their house is being looked after and cared for by the new

residents. The joy and assurance that their house is taken care of motivated older adults to share their furniture and kitchen utensils.

Now it's (home) rented (...) it's very close to here (Trinity). So, I do visit home once in a while... They are very good people, [they] maintain our home very well as their own. That is important more than the rental amount. So, I rent it to them for a small amount which they can't get anywhere near.

Single older adults transferred the ownership of their home to close blood relatives such as siblings. Since they don't have offspring to transfer their wealth, they are happy to transfer their home to a close blood relative. Cultural norms regarding the transfer of wealth also play a role in this decision. Following the cultural practice, wealth and property of those who are unmarried will transfer to the closest blood relative such as siblings, nephews and nieces. According to Alice, *"The house and property in Kottayam were in the name of me and my brother. But I, why should I have it? I gave it to him without his consent.*

Additionally, due to the fear of their house going to ruins or being misused by the tenants, older adults took the responsibility of visiting the house to keep it clean and tidy. Even though no one was actually living there, older adults who could afford hiring domestic helpers found staff to take care of their home, properties, and pets. For example, Mary stated:

I had given it for rent to a man. He has left now. My home has reached such a pathetic condition! It looked like an uninhabited place. He has turned it upside down.... So far, as my children are abroad, it's my responsibility to take care of my home, no! That's why I visit there, even if I'm not well.

This was also important to Jacob who stated:

It is still there. It is being maintained still. Two staff are maintaining it and we are giving them a salary too... We used to go once in a while... Even if it is here, we have two people. They are even more dependable than our son. We have a driver. We helped him to start a taxi service. They all see me as their own father. I see them as my own children... We trust them. They have our house key with them.

Emotional attachment towards their homes motivated older adults to retain home ownership. The above narratives show that older adults deploy different strategies to retain and care for their homes.

4.6.5 Attachment to things and pets

The possessions older adults left behind range from photographs and plants to pets. Furthermore, older adults are ready to share their possessions such as kitchen utensils, furniture and electronic equipment such as TVs and AC with tenants. For example, Molamma stated, *"I kept some of our possessions like photos, TV, and washing machine in a separate room. It's closed and the key is with me. I allowed them to use our furniture. Since they already have a TV and a washing machine, they don't want ours."*

Older women in the study reported how attached they were to the domestic possessions they had left behind. These possessions, such as cooking utensils, were an integral part of their daily rituals when they lived with the whole family. Due to attachment, more women in the study felt sad over the unutilized condition of their kitchen utensils at home. So, they readily give them to others who are needy, especially to poor neighbors who respect them. Home possessions also include the trees planted by family members. Care home residents are happy to take the fruit from these trees to their retirement homes after they visit. It is not because they wish to have this fruit but rather because of the memories and emotional attachments towards their spouses and homes. According to Mary:

I'm a bit worried when I think about the utensils at home. There are many of them. How can I maintain all of them when I am here [at Trinity]? But I'm planning to give some of them to some poor people... There are others. There are some slum people near our home. They're so friendly and helpful. Poor dears! I plan to give them to those poor ones. They call me 'Mummy'... The plants have grown into big trees with fruits and herbs now. They were planted by my husband. Sometimes I collect the fruit that has fallen on the ground and take it with me here.

Those older adults who have pets at home depend on others to take care of these pets and their home surroundings. Generally, the neighbor does this, and in return, this favored neighbor is rewarded in the form of money and in-kind. In such a way, an older adult keeps and strengthens his or her interpersonal relationships with the neighborhood. Even with the absence of human inhabitation, older adults prefer to create an atmosphere of home by keeping a pet at their home. This was described by Stephen who stated:

We have our dog at home... There is a neighbor to take care of it. We have asked them to do so. We give them some money and our ration card [a document used to obtain groceries such as rice, wheat, sugar and kerosene at a cheaper price through the public distribution system] so that they buy rice from ration shop and give food to the dog.

Similarly, Omana allows someone else to take care of her pet dog Yoshi. She stated, *My Yoshi is at home... he became very old.... I appointed a person to take care of all this property and my home. He will feed my Yoshi. One more thing. I have a big sword at home. Made up of brass. It's quite old too.*

Older adults keep cherished possessions in the form of photographs, paintings and artistic works as these forms evoke memories of beloved and deceased family members at their homes. Since they are very emotionally attached to these photographs and paintings, the presence of such possessions often brings back memories of deceased family members. Alice, a single and retired older adult teacher, likes to keep photos of her parents and her brother inside of her cupboard at home. When she looks at the photos, she feels sorrow about her present condition of loneliness. So, she doesn't want to look at them in front of others; she only wants to keep them with her as memories of her parents and brother.

Possessions are also kept outside of the home as well. For example, Kurian considers the resting place of his parents and wife, at his church near home, as a valuable possession in his later life. During his occasional visits home, he visited the family cemetery near the church. Generally, Syrian Christians in Kerala have their own family tomb places near their family church. According to Kurian:

My wife was an artist. She used to paint and do some good embroidery work. Now in her absence, I feel they are very precious in the rest of my life. I have brought one of her paintings here [Trinity]. I placed it in on the wall of our room. The rest of the paintings were kept safely at my home ... My wife and my parents are resting in peace there. So naturally I go there every month... Yes, they [the personal belongings of his deceased wife] are well preserved there [at home], although it was rented to nuns.

For Alice, photos bring a mix of joy and sorrow. She explains, *“I have photos of my parents and siblings. Some of them I took with me here. Some of them I kept in my almirah (wardrobe) at home... Nowadays, especially after my brother’s death, I don’t like to look into it. I feel sorrow. They all [parents and siblings] have gone. I am the only one remaining [sobs].”*

The emotional attachment older adults have with home extends from the material to the non-material possessions in the home. The unutilized condition of possessions evokes sorrow among older adults which motivates them to share these possessions with others. Rearing pets at home can be considered to be a strategy to avoid the feeling of home being uninhabited.

4.7 Discussion

In the Indian context, older adult wellbeing while living in a retirement home and its relation with place attachment have not been sufficiently incorporated into theoretical or empirical understanding. This paper examines the motivations and practices of older adults living in retirement homes in India in retaining their homes as a valued possession.

Older adults prefer to stay at home. The first residence preference is always their own homes. This study shows that health issues, a need for assistance, a lack of security, the migration of children, loneliness due to loss of a spouse, and a wish to live independently are the major reasons older adults seek out an alternative source of residence in the form of a retirement home. This change in place of residence can be regarded as a viable option in response to the environment (Leith, 2006). When they do so, older adults try to secure a suitable retirement home close to their own homes. This reflects the proximity seeking behavior of place attachment (Scannell & Gifford, 2010) coupled with the choice of residences influenced by family tradition (Izuhara, 2000).

This study shows that there are various reasons older adults retain home ownership while living in a retirement home. Home is a place embedded with memories and emotions (Blunt & Varley, 2004) and owing a home helps to promote autonomy, control, continuity, self-expression and personal identity (Fox O’mahony & Overton, 2014). Additionally, a sense of homelessness creates distress around autonomy and self-identity (Teo & Chiu, 2016) and

motivates older adults to retain home ownership. Traditionally, and as per cultural norms in India, home is a place as well as a property that is supposed to be transferred from one generation to the next. By doing so, an intergenerational flow of wealth is executed, and family route and pride are maintained because home is a place constantly linked with the cultural and emotive world (Easthope, 2004). This study shows that the concept of home is rooted in the cultural meaning system. Cultural schemas of care and obligation towards the next generation motivate older adults to retain and maintain home. By doing so, older adults experience a sense of satisfaction by fulfilling their familial responsibility. Older adults perceive that it is their duty to preserve and maintain the family roots and place identity of the following generations. Fulfilling familial obligations, which are shaped by culture, brings a sense of satisfaction among older adults. Older adults also take responsibility for maintaining the family property, in the absence of siblings. Memories of past life and deceased family members associated with home ties older adults emotionally to their home. Hence, occasional visits to home bring feelings of happiness among older adults. This study shows that older adults in these specific retirement homes are economically independent and have autonomy in decision making. Female older adults are keener to make occasional visits home to clean, garden and farm, even with physical hardships. These occasional visits provide the opportunity to engage in homemaking activities that they usually cannot perform in retirement homes. These activities ensure a sense of continuity in an older adult's life. Social ties and interdependence play an important role in maintaining the feeling of home of older adults (Coleman, Kearns, & Wiles, 2016). In order to maintain home, older adults apply different strategies, including: renting out the home; seeking help from other family members or neighbors; or deploying salaried employees. The purpose of renting out their home is not for economic enhancement but rather to find a suitable person or family to maintain the home and possessions, and so the home remains inhabited. These strategies enable older adults to enter into new interpersonal relationships or to strengthen their already established interpersonal relationships in the absence of migrated children.

A shift in residence brings changes in the meaning of home from shelter to cherished possession. Possessions in the home are both material as well as non-material, such as pets. The presence of pets at home enables older adults to have the sense that home remains habited. For Miller (1998), home and possessions with a sense of agency motivate older adults to cherish their possessions at home. Moreover, the act of dispossession of possessions is a painstaking decision similar to sacrificing part of one's life (Marcoux, 2001).

This chapter contributes to a better understanding of the ageing process of older adults living in retirement homes in India, which is a relatively new exploration. Similar to other studies (Clapham, 2011; Easthope, 2004; Leith, 2006; Manzo, 2005; Maslow, 1955; Moore, 2000), this paper also indicates that home is an integral part of making sense of security and identity and constantly linked with the physical, social, cultural, and emotive world. Studies (Meijering & Lager, 2014; Sherman & Dacher, 2005) also proved that cherished possessions promote a sense of comfort, security, and continuity. While other studies have identified home as a place of residence, this study additionally identifies home as a possession as well as a place of attachment outside of the current place of residence which in turn brings identity,

comfort, and continuity and promotes the overall emotional wellbeing of older adults living in retirement homes.

In the Indian context, place attachment, the role of possessions, and the place making practices of older adults in retirement homes are least addressed. This study shows how the cultural belief system, values, and emotions motivate older adults to retain and maintain home as a possession for the next generations who have migrated as a route of identity and pride, despite the physical hardships.

Chapter 5³

Cherished possessions, homemaking practices, and aging in care homes in Kerala, India

³ This chapter is an adapted version of the following article:

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5.1 Introduction

Various studies have shown that cherished possessions promote a sense of continuity, comfort, and security that enables older adults to stay connected with their past (Nord, 2013; Sherman & Dacher, 2005; van Hoof et al., 2016). Being surrounded by material possessions can evoke positive emotions and contribute to domesticity and a homely atmosphere (Falk et al., 2012; Klaassens & Meijering, 2015). Smaller possessions in particular may be imbued with intense significance by people who are limited in the objects they can take with them when moving (Walsh, 2006). The cherishing of possessions evokes emotions through which older adults seek to sustain memories of people and places. In this study, we define cherished possessions as the objects older adults take with them to a care home, as these possessions are embedded with different meanings, multiple emotions, and memories that enable them to turn their new home into an integrated domestic space (Rose, 2003). These possessions elicit feelings of spatial proximity that reflect family togetherness (Rose, 2004) as well as belonging, domesticity, and intimacy (Walsh, 2006). Emotional geographers have largely focused on emotional experiences and expressions when studying the wellbeing of older people in relation to places (Smith, 2009; Varley, 2008). Research on older adults living in care homes has tended to focus on issues of home, belonging, and homemaking practices, but has paid less attention to the role of possessions. This is one of the first studies to examine the homemaking practices of older adults in a non-western setting.

Of the states in India, Kerala has the most rapidly aging population and the highest life expectancy. A decade ago, Kerala already had the highest number of institutional care homes for older adults (HelpAge India, 2009). As Indian society continues to undergo socio-economic and other demographic changes, the demand for institutional geriatric care services is expected to grow (Rajan, 2002; Jamuna, 2003). Here, care homes are generally perceived as places where older adults are left after being forgotten by family members while studies on care homes in India have largely focused on poverty alleviation and basic services (Liebig, 2003). How cherished possessions aid the homemaking process to influence the subjective wellbeing of older adults in care homes has seldom been addressed in the Indian cultural context. This study attempts to identify the different types of cherished possessions older adults have, and how they engage with these possessions. Specifically, we seek to determine the emotional qualities of these cherished possessions that help in the homemaking process, and thus promote emotional wellbeing. This study was conducted in three care homes with residents from different socio-economic backgrounds. Care homes can be considered to be non-normative dwelling spaces that accommodate unrelated strangers. As the rules, regulations, and resources of these three care homes vary, the types of cherished possessions the residents have, and how they engage with these possessions, are also likely to vary.

Most studies on material culture and meaning in later adulthood have focused on western countries (Kroger & Adair, 2008; Meijering & Lager, 2014; Nord, 2013; van Hoof et al., 2016). This study shows that material culture and the emotional qualities of home and homemaking in the realm of emotional geography are important for the Indian cultural context as well. In the next section, we review the literature on emotional geography and the role of cherished possessions in homemaking practices. In the following sections, we present our methodology, our results, and a discussion of our results.

5.2 Emotional geography and role of cherished possessions in homemaking practices

The literature on *emotional geographies* has emphasized the importance of taking into account emotional engagement, emotional experiences, and expression when examining the wellbeing of people in relation to places (Anderson & Smith, 2001; Davidson & Milligan, 2004; Wood & Smith, 2004). The wellbeing of a person is highly determined by their sense of belongingness associated with home (Cooney, 2012; Falk et al., 2012; Giuliani, 2003), a central place capable of providing a person with comfort, safety, and security. Feeling at home has a positive effect on the wellbeing of older adults because it fosters a sense of autonomy, self-confidence, and social integration (Meijering & Lager, 2014; Smith, 2009). In fact, according to Blunt & Varley (2004), “Home is invested with meanings, emotions, experiences and relationships that lie at the heart of human life” (p.3). Cooney (2012) observed that the ability to maintain one’s own identity, to continue a familiar routine, and to talk about the past contributes to feeling a sense of home. Blunt & Dowling (2006) further described three potential components of critical geographies of home that are not mutually exclusive. In the first component, *home as material and imaginative*, home is perceived as a material dwelling as well as a set of meanings shaped by emotions and feelings of belonging. The second component is *the nexus between home, power, and identity*; this implies that a person’s role and identity are constantly (re)produced and articulated through power relations. The third component is home as *multi-scalar and open* which suggests that home can exist at different scales, ranging from the body and the household to the city, nation, and globe. In a care home, where unrelated people live together, the sense of belonging, imaginaries of home, and homemaking practices may also stretch to a different scale.

In a non-normative dwelling, homemaking practices which involve different material possessions may reflect different aspects of the residents’ multi-faceted identities such as sexuality, heritage, family, connections, and spiritual beliefs. As a result, the maintenance of materiality can help to reconcile diverse dimensions of their multi-faceted selves (Gorman-Murray, 2007). In his review of multi-disciplinary work on masculinity and domesticity, Gorman-Murray (2008) focused on two theoretical terms: domestic masculinity and masculine domesticity. Domestic masculinity refers to how the identities of men are formed through domestic ideals and homemaking practices. Masculine domesticity refers to how homemaking practices refashion the dominant discourse of home (p. 369). The homemaking practices of older men in care homes may also include domestic possessions that redefine the dominant discourse of home which defines their role as breadwinners. Nonetheless, because the work of Gorman-Murray has been largely focused on the western context, it is necessary to critically examine how it can be adapted to the non-western experience. For older adults, moving to a care home is often associated with acute distress and a loss of identity. Citing her own father’s experiences, Varley (2008) explained how the loss of home and the dearth of personal material culture in care homes causes residents to experience severe distress and a loss of identity. By contrast, the material culture of home supports individual and collective narratives of identity, and promotes a sense of place (van Hoof et al., 2016; Varley, 2008).

Homemaking is a continuous process involving adaptation and modification. Meijering & Lager (2014) observed that when living arrangements change, older adults try to recreate

home in their new setting by retaining some of the material possessions that remind them of the ambience of their previous home. Blunt (2003) noted, in a study on an Anglo-Indian settlement in India, that productive nostalgia— an attachment to different places oriented towards the past, present, and future—was reflected in the residents’ homemaking practices. It thus appears that the wellbeing of older adults in care homes is determined by their level of attachment to the place where they live and the sense of home it provides.

The material world plays a significant role in shaping cultural processes through cultural norms, values, and practices (Miller, 1998). Things or materials have the power of vitality which acts as an agent or a force with trajectories and propensities (Bennett, 2010). Van Hoof et al. (2016) observed that the sense of home is embedded within personal experiences and emotions, and that the emotional wellbeing of older adults is enhanced when they are able to keep those personal belongings which hold the most sentimental value for them. In a study on the possessions of older adults in assisted living facilities, Nord (2013) noted that these possessions were of three types: representations of who they were; memorabilia; and mundane objects. Objects of personal representation are linked to the role and position of an older adult across their life span. Memorabilia are associated with happiness and sadness while mundane objects are the possessions required for daily life (Nord, 2013 pp.138–139). As they can perform roles that go beyond utilitarian purposes, possessions do not have to have a functional value. Kroger & Adair (2008) also observed that cherished possessions take on symbolic value in later life as they are the containers which hold the remnants of an individual’s life course; they are symbolically linked to the person’s social status, cherished relationships, family across generations, past events, the self in previous life phases, and past historical eras. The emotional investments made in material possessions and the subsequent symbolification of these possessions are articulated through personalization, extension, and embodiment (Cristoforetti, Gennai, & Rodeschini, 2011; Rubinstein, 1989).

In the Indian cultural context, it is generally understood that adult children have a familial duty to care for elderly parents at home (Liebig, 2003). When older adults move to a care home, the emotional relationship with their children may change. Friendship and intimacy are important sources of support and informal care because each involves exchanges of care and emotional investment. Emotional care and friendship can be greatly facilitated through co-presence (Bowlby, 2011). Emotions of missing and longing can motivate people to construct shared co-presence. Baldassar (2008) explained the construction of four types of shared co-presence: virtual; proxy; physical; and imagined. Shared virtual presence is constructed mainly through communication technologies such as Skype and video calling. Co-presence by proxy is articulated through objects such as photographs. Physical presence is resolved through bodily presence. Imagined co-presences are reflected in activities such as prayers that serve as a constant reminder of missing kin (p. 264). In a care home, traditional intergenerational care exchanges between people are replaced by shared memories captured in photographs. These pictures can help older people build a sense of co-presence through collective and embodied history. Moreover, sharing experiences and memories with care home neighbors can help older people constitute a personal community based on trust and

knowledge of each other and can facilitate a space for shared co-presence (Spencer & Pahl, 2006).

Photographs can be used to imagine the presence of other people and to evoke memories of shared experiences. Thus, in care homes, images and memories can be used to support the momentum of care exchanges between older adults and family members or friends (Alinejad, 2019; Madianou, 2016). When people move, their possessions may become more important to them; this is especially the case when those possessions metaphorically represent their sole link to their relationship with, and memories of, a particular person. Bringing such cherished possessions to a new place can be seen as a strategy people use to ensure the consistency and security of their existence in the new place (Marcoux, 2001).

Additionally, as cultures and norms are changing, the role of material culture in homemaking practices is likely to differ from place to place. A study on migrant settlements in Goa, India showed that homemaking processes are embedded in cultural practices (Bailey, Channakki, & Hutter, 2008). For older adults who live in a care home, the process of identification and the expectations about the concept of home are entrenched in their cultural schemas. In turn, schemas are internalized through culture. For D'Ándrade (1992), "A schema is a conceptual structure which makes possible the identification of objects and events" (p. 28). Schemas can help people identify and interpret objects or events with minimal clues. If the physical atmosphere of a living space is not culturally appropriate, older adults may try to recreate home through their cultural behaviors for example by modifying the physical elements and introducing new components to improve ambience (Seo & Mazumdar, 2011) or by conceptualizing home as a place of worship. Based on a study of migrant Hindus in southern California, Mazumdar & Mazumdar (2009) observed that as well as affecting homes in physical ways, religion can help to create a sacred ambience and ethos by way of material possessions which can, in turn, manifest multi-layered experiences of religion and place. Thus, our key focus in this study is on how possessions contribute to the emotional wellbeing of older adults in Kerala, India through the concepts of co-presence cultural schemas and homemaking.

5.3 Methodology

This investigation centered on the Kottayam District in Kerala. Of the Indian states, Kerala has the most rapidly aging population; according to the 2011 census, adults aged 60 or older comprised 12.6 percent of the state's inhabitants (Registrar General of India, 2011). As the state has relatively low fertility rates and high rates of migration of young adults, there is a growing need for care facilities that support the wellbeing of the older adult population. Kottayam District has a large number of care homes of various types and a large proportion of district residents (43.6%) are Christians who belong to various denominations (Zachariah, 2016).

We used data from a qualitative study conducted in 2015 at three older adult care homes: Prasanthi Bhavan, a welfare-based home for the poor; Trinity, a retirement home administered by Catholic nuns; and Sahya, a for-profit and secular retirement home for the upper-middle-

class. To maintain anonymity, pseudonyms were used for each care home and for the research participants. In the next sections, we outline the methods used to obtain rich data including in-depth interviews, observation, and photographs.

5.3.1 In-depth interviews

Between April and December 2015, we interviewed 37 older adults and three caregivers to collect information about the life histories and life experiences associated with different places and homemaking practices of older adults living in care homes (see Table 5.1). An interview guide was prepared in English and subsequently translated into Malayalam (the local language). Research participants were asked the following questions: Did you bring any personal possessions to your new home? Which possessions did you bring? Why did you bring these possessions with you? How are these possessions linked to you? In Trinity and Sahya, interviews were conducted in the personal rooms of the older adults. In Prasanthi Bhavan, research participants shared rooms so interviews were conducted in communal spaces in order to protect their privacy. Each interview lasted approximately one and a half hours; interviews were conducted up to the point of data saturation.

5.3.2 Observation

Based on the assumption that interviews alone could not fully capture the role of material culture in the care settings, information was also collected through observation. Observation as a research method provides us with a deeper understanding of both the care home and of the intimate and personal spaces occupied by older adults (van Hoof et al., 2016). Observations of the physical settings of the care homes, the material possessions used by the older adults, the ways the older adults engaged with different material possessions, and the activities of the older adults helped to contextualize the information shared in interviews. These observations were noted in a field diary during the fieldwork and were incorporated into explanations of the participants' context.

5.3.3 Photographs

Alternative data collection techniques can be used to gather evidence on the practices of research participants, to facilitate productive exchanges about the reasons for the practices, and to enrich the information being collected (Hitchings, 2012). The main aim of photography in this study was to enrich narratives about the wide range of cherished possessions used by the older adults in their personal living spaces. Important objects were first discussed during interviews. Upon consent of the owner, a photograph of the object was taken in order to support narratives from the interviews.

Table 5.1: General profile of care homes and older adults

Care home	Female	Male	Religion	Employment status of older adults before reaching care home
Prasanthi Bhavan	10	5	Hindu 14 Christian 1	Daily wage worker/ unemployed
Trinity	8	4	Christian 12	Retired employee/ pensioner
Sahya	6	4	Christian 10	Return international migrant; retired employee/ pensioner
Total	24	13	Hindu 14 Christian 23	

5.4 Data analysis and presentation

The interviews were conducted in Malayalam and were later translated into English. ATLAS.ti, a qualitative software package, was used for data management and analysis. Following the principles of grounded theory, we employed two main cycles of coding (Hennink, Hutter, & Bailey, 2011). In the first cycle, primary codes were developed both inductively and deductively. In the second cycle, code families, such as the material possessions brought to the care home, and the emotions and meanings associated with the possessions, were further developed (see Table 5.2). In this study, our empirical data are presented in the form of narratives by older adults from different care homes. To allow for the greatest possible diversity of perspectives, each of the selected examples is unique and so highlights different aspects of emotions and material culture revealed in the study.

Table 5.2: Themes on cherished possessions and emotions associated with possessions

Theme	Codes
Material possessions brought to care homes	Religious possessions; possessions linked with memories of working life; possessions linked with incidents happened in past life; possession linked with memories of deceased family members; possessions linked with family members; possessions linked with memories of pet
Meaning and emotions associated with Possessions	Attachment; story behind possessions; happiness; sorrow; distress; pride; symbolic meaning; co-presence; conflict, unfulfilled aspirations; loss of possessions

5.5 Results

This results section is organized according to: (1) the roles of the different types of material possessions cherished by the older adults; and (2) how these possessions were taken care of in

the three different care homes. The data suggest that there were three types of cherished possessions: religious possessions; possessions linked to past life events; and possessions linked to memories of family members. In the following section, we describe how the older adults engaged with these possessions. The gendered and socio-economic backgrounds of the participants, and the rules and regulations of the care homes, also determined how the older adults engaged with their cherished possessions.

5.5.1 Religious possessions

Older adults brought different kinds of religious possessions from their previous homes to the care homes. These included holy texts, rosaries, Japamalas (a string of prayer beads), and pictures of Jesus Christ and Hindu Gods. This makes sense as the 2011 census shows that the population of Kerala is nearly 55 percent Hindu and around 18 percent Christian (Registrar General of India, 2011).

One research participant, Mathew, lives in Trinity. There are many religious possessions in his room including a Bible, a rosary, images of Jesus Christ, and a Palm Sunday leaf. Mathew has pasted printed verses from the Bible on the walls of his room. Mathew used to teach religion at Sunday school in church and currently provides counselling for youths in nearby Catholic institutions. Mathew stated:

This is my Bible, from back in 1978. Malayalam. I've marked certain lines. I read it daily, just before I'm off to Holy Mass. Before I open the Bible, I'll say, "God, please tell me what should I do today". And I tell Him, "I'm thankful for receiving a good day. I surrender this day unto your hands. Help me to do good deeds". That's how I start my day.

Figure 5.1: The Holy Bible, religious possession: Setting direction for day-to-day life

Admission to Trinity is restricted to older adults who are Christians; residents are required to attend three daily prayer services held in the home's small chapel. Thus, most of the older adults who choose to move into Trinity want to lead a spiritual life. As the above quote

illustrates, leading a religious life is very important to Mathew. His copy of the Bible (see Figure 5.1), as a representation of his past life and as a mundane object (Nord, 2013), determines the direction of his day-to-day life. His youth counselling classes are based on the Bible. Mathew's interactions with people within and outside of Trinity also reflect the role of the Bible in his daily life. As suggested by D'Ándrade (1992), leading a religious life can be considered to be part of a cultural schema, designed to secure comfort and safety. This schema motivates Mathew to lead a religious life based on the Holy Bible.

Sarojani, a Hindu, moved to Prasanthi Bhavan after being neglected by her son and daughter-in-law. She is hoping to resolve her family problems and eventually return home. Sarojani is a devotee of the goddess of the Valliyamkavu temple which is situated in the Idukki District. Aligning with her faith, Sarojani always wears the japamala she obtained from her temple. Used by devotees to help them ward off evil and lead peaceful lives, japamalas are garlands made with rudraksha beads or seeds of the holy *Elaeocarpus ganitrus* tree (see Figure 5.2). When asked about this important possession, Sarojani stated:

This [her japamala] is precious to me. I got this japamala from Valliyamkavu. The Valliyamkavu Amma [a deity of the temple Valliyamkavu] is very powerful. I am a very loyal devotee of Valliyamkavu Amma. It's a kandaka shani [a personal misfortune in life as per Hindu astrology] for me. I do believe the gods Ganapathi, Saraswati, and Mahavishnu are part of this japamala. This is important. What more do we need than Gods' grace? Every day I pray with this japamala, especially when I am stressed.

Figure 5.2: Japamala: Sense of security and hope for better future

Sarojani believes that her misfortunes and family difficulties can be explained by her Hindu horoscope based on her birth star. She uses the japamala, to pray to three gods: Saraswathi, the goddess of wisdom; Ganapathi, a remover of obstacles; and Mahavishnu, the god of present life. She believes that by wearing her japamala and praying with it, her issues with her son and daughter-in-law will be resolved; they will eventually come to see her and take her home. For Sarojani, the japamala provides her with a sense of security and hope for a better future.

Religious possessions, which are relatively easy to move or carry from one place to another, help to modify the physical environment (Seo & Mazumdar, 2011) and create a sacred ambience and ethos (Mazumdar & Mazumdar, 2009). Older adults living in care homes tend to have more time to pray than before as they have fewer caregiving responsibilities. For older adults, praying brings a sense of security and hope. The rosary is very common religious possession among older Catholics, as it enables them to perform different kinds of prayers. The older adults reported using different kinds of rosaries for different prayers, as they pray not only for themselves and their family, but for the poor and needy people of the world. By praying for others, the older adults are able to connect to the outside world and hope for the wellbeing of others, especially the poor and the needy. Through prayer, older adults create spaces for an imagined co-presence (Bowlby, 2011); they remember the people who are close to them, while also praying for the less fortunate. Baldassar (2008) explained that this kind of co-presence is articulated through the imagination. Religious possessions such as a rosary or a Bible play a central role in the process of articulating co-presence through the imagination. Our empirical material shows that religion and religious practices can play a stronger role in the lives of older adults when they are living in care homes, as these settings can be perceived as isolating and lonely. Thus, the emotional geography of care homes needs to give equal importance to the practices of their older adult residents.

5.5.2 Possessions linked to past moments in life

Older adults also had cherished possessions connected with their pasts, and especially with their working lives. Each of these possessions can be linked to a certain period or a particular event that happened in the life of the possessor. Some of these possessions were memorabilia (Nord, 2013) that are not used for their intrinsic purpose but instead reminded the older adult of emotional moments in the past. Making memories and accumulating possessions are ongoing processes in the life of an older adult that help with creating a sense of continuity with the past. Thus, the loss of these possessions can cause distress for an older adult.

At the time of data collection, Kuruvila lived in Sahya after spending most of his 35-year working life outside of Kerala. He retired from an Indian Government ordnance factory in Tamil Nadu. When asked about his most cherished possessions, Kuruvila stated:

In the ordnance factory we had a system. At the time of retirement, each and every staff member would get a walking stick and a torch. I lost my torch. Now only this walking stick remains. This stick is made from the carpentry section of the factory. Before I came to this place, I was in Dubai with my son and his family. Before I left for Dubai, I gave this stick to one of my neighbors. Actually, he asked me, so I gave it to him. After a few months I returned to Kerala. After some days I started to think of my stick. I don't want to lose it... It's not about money. It's all about love and the memories of my friends and the place I

worked... My 35 years of service. Finally, I got it back. For him it's just an ordinary stick. But for me it's the memory of my 35 years of service. It's a token of love.

Figure 5.3: Walking stick: Token of love and memory of work-life

For Kuruvila, his walking stick (see Figure 5.3) embodies the symbolic value of his working life. It reminds him of his workplace and of the time he spent with former colleagues. This productive nostalgia (Blunt, 2003) helps him constitute a sense of comfort and continuity in a new setting. Kuruvila's story shows that the degree to which a person is attached to a possession is often not fully understood until it is lost or misplaced. Shared experiences and memories related to places and people are encapsulated in materials through which friendships are commemorated (Bowlby, 2011). Kuruvila's experience is unique, as he has moved between different living arrangements: first living with his spouse; then living with a son and his family; and, finally, living in the care home. His attachment to his possessions has also changed with every move he made. For Kuruvila, the loss of possessions has been a source of distress in his life. By recovering his walking stick, Kuruvila was able to re-connect with an object that symbolizes his past life and his self-identity. This evokes strong emotions such as pride, love, and nostalgia.

John and his wife Komalam reside in Sahya. They came to Sahya from Hyderabad where John was running his business. When they moved to the care home, they brought two items: a black-and-white photograph of John dressed in a navy uniform and an old shoe polish brush (see Figure 5.4). John explained:

I joined the navy during the British time; I was in Karachi [Pakistan]. We youngsters revolted against the British, and therefore, we were to be arrested. We escaped from

there. They issued an arrest warrant and sent it to my house in Kerala. If I was caught, I would have been arrested and punished. For some time, I was in a hide-out and lived under a fake name, Vasudevan Nair... In reality, I am a freedom fighter. Nobody knows it. But unfortunately, see, we don't have enough proof of it. My wife is trying to find some proof of it. She wants me to be officially recognized by the government as a freedom fighter. I don't have much to show about those days except this photo and old navy shoe polish brush.

Figure 5.4: Shoe polish brush: Sense of pride

For Kuruvila and John, these possessions reflect memories of their working lives and their gendered roles (breadwinner/freedom fighter). For more than 70 years, John has kept the photo and the brush as mementos of his proudest moment: his unrecognized participation in the Indian independence struggle. John's emotional investment, pride, and sadness about not being recognized are reflected in material culture through personalization, extensions, and embodiment (Cristoforetti, Gennai, & Rodeschini, 2011).

Generally, the older adults taking part in this research reported cherishing different types of possessions linked to the past, including gifts, mementos, and photographs as well as specific items including a floor mat, a walking stick, and a brush to polish shoes. These possessions are cherished because they are embedded with love, nostalgia, memory, a sense of pride, and the recognition that has been bestowed on the older adults by their families and employers.

5.5.3 Possessions linked with memories of family members and pets

Photographs of family members and pets play a significant role in the realm of the material culture. Memories associated with deceased family members—including children, husbands, wives, and parents—are embedded in the objects brought to the care home. For the older adults, such possessions are symbolic representations of their deceased family members, and so help them to connect with their past (Kroger & Adair, 2008). Photographs are symbolic possessions embedded with memories of family members (Rose, 2004; Sherman & Dacher, 2005) that can help older adults create a sense of continuity in a new residential setting. This was described by Remani, a resident of Prasanthi Bhavan who was neglected by her husband. Afraid he would continue to abuse her, she decided to leave home after her younger son died. She took with her a few holy books and an identity card of her son. She recalled:

I had a son. He passed away few years back. I took his identity card when I came here. It has his photo on it. I keep this card inside the holy book... I have two or three holy books with me which I brought from my home. I pray with these books every day, morning and evening. Now I know every line by heart.

Depending on the context, emotional qualities embedded in material culture can evoke both happiness and sadness. Van Hoof et al. (2016) observed that the sentimental value of possessions can promote the wellbeing of older adults in care homes. According to Hinduism, moksha, or liberation from rebirth, is the ultimate aim of a person's life. In order to attain moksha, a person must go through four stages: Brahmachaya, the student stage; Grihastha, the householder stage, Vanaprastha, the hermit stage; and Sanyasa, the wandering ascetic stage. Remani's son was unmarried and died at the age of 26 before entering to the Grihastha stage. She keeps his identity card inside a holy text to help her son attain moksha. Faith and praying with a holy text are everyday rituals motivated by the cultural schema (D'Ándrade, 1992) of moksha. The older adults in this study remember family members who have passed away through prayer. They also cherish different kinds of possessions related to deceased family members including photographs, Bibles, images of gods, and furniture used by family members. Although some of these possessions are associated with sorrow, cherishing these possessions while living in a retirement home can reflect the efforts of an older adult to stay close to the memories of deceased family members through symbolic representations embedded with love, memories, and nostalgia.

Possessions, including photographs and gifts, linked to the memories of non-co-residing family members were also cherished. These possessions create a sense of co-presence (Bailey, Channakki, & Hutter, 2008) through symbolic representation that fosters feelings of closeness with family members such as children and grandchildren who live abroad or are otherwise far away. In addition, as pets are not permitted in the care homes, some of the older adults keep photographs of their pets to create this sense of co-presence.

After her husband's death, Omana chose to move to Sahya. She still has her own house in the Idukki District where her dog Yoshi is staying.

My Yoshi, I miss him a lot. I wanted to keep him here with me. But how is it possible? Before I moved to this place, I was in High Range. I have a house there and few acres of

estate. I have a servant to take care of all of these things. Now Yoshi is with him. It's not me, my granddaughters, they are in the US, they named him Yoshi. They got this name from a Japanese game. Yoshi means savior...I feel so bad because I go there once in or twice in two months. He will die soon. Now he is twelve years old. When he was young, if I am not at home for one or two days, he used to get angry. He will not come to me even after I reach home. After a while he comes to me and sits on my lap. Now he is getting very old. Even though he is old he recognizes me when he hears my car horn. He walks slowly towards me. I lift him up. Then I spend one or two days with my Yoshi.

Figure 5.5: Yoshi: Remembering a pet and creating co-presence

The bond between older adults and pets promotes positive mental health which enables older adults to experience comfort and safety, social inclusion and participation, as well as a purposeful routine and meaningful role in life (Hui Gan et al., 2019). Pet attachment support will help to reduce loneliness among older women (Krause-Parello, 2012). Omana keeps a framed photo of Yoshi in her room in Sahya which reflects her love and affection for him (see Figure 5.5). As she knows Yoshi is old and will die soon, this photo represents mixed feelings; love and compassion sit alongside sorrow. Omana is creating the (co-)presence (Baldassar, 2008; Bowlby, 2011) of her beloved pet through proxy symbolic representation.

5.5.4 How do the older adults engage with material possessions?

The older adults in this study have different ways of engaging with their possessions. Some of these possessions are openly displayed, while others are more personal and so are hidden from public view. Possessions that are used daily, such as rosary beads and religious texts, are often kept on a table close to the bed for easy access.

Possessions such as images of gods, the holy cross, family photographs, gifts, and crafts are often hung on the walls of rooms. Photographs may also be placed on tables, shelves, refrigerators, or televisions. These possessions are displayed in a highly decorative manner and are very visible. Holton (2017) pointed out that decorating places with objects is an emotional place-making activity that promotes homeliness in institutional settings. This enables older adults to manage their self-identity, family relations, and self-esteem (Walsh, 2011; Woodward, 2001). When moving to a new residence, these photographs help older adults introduce their non-resident family members to other older adults and caregivers in the care home. Moreover, displaying family photos creates an atmosphere conducive to discussing their family when other older adults visit them. Thus, in addition to fostering a sense of family togetherness (Rose, 2004), these visible photographs can help an older adult build a personal community (Spencer & Pahl, 2006) in a new place. Shared possessions therefore help to develop social capital that contributes to creating a homely environment in the care facilities.

Some of the older women reported that they preserved cherished possessions in religious texts. Possessions linked to the memories of deceased children are often secured and memorialized in this way. For example, Alphonsa, a 72-year-old resident of Sahya, was expelled from her church when she married Jacob, a non-Catholic Christian who was a member and a leader of an atheist organization. According to Alphonsa, Jacob's mother—a religious woman—was very worried about her son. The day after the marriage, Jacob's mother gave Alphonsa a Holy Bible as an attempt to encourage the presence of the Bible in her son's family. For the last 45 years, Alphonsa has kept the Bible with her. She also keeps a photo of her son, who died at nine months of age, in this Bible. Thus, for Alphonsa, the functional value of this Bible is less important than the certain difficult moments of her past which it represents. Her Bible symbolizes the conflicts, beliefs, and memories, such as disagreements between her husband and mother-in-law regarding their religious beliefs, and the conflict between Alphonsa and her parental church about marrying a non-Catholic. In addition, the Bible is linked to Alphonsa's memories of her mother-in-law and her arrival in a new home as a young bride. Munt (2012) has argued that faith and spirituality provide personal resilience through religious symbols, such as the Bible, images of Christ, or the cross. According to Hart, Blincow, & Thomas (2007), resilience is an act of engaging in positive behavior in the face of adversity. For an older adult, the act of keeping an image of a deceased child in the pages of a religious text can be seen as an act of resilience against the devastation of losing a child.

Depending on the memories and emotions associated with a particular possession, the older adult may be more or less willing to display it. Alphonsa and Remani prefer to keep the photographs of their deceased sons in religious texts that are not visible to others. Moreover, the rules and regulations of care homes may push older adults to avoid displaying their cherished possessions. Such rules and regulations can greatly discourage emotional expression among the residents. For example, Maheswari, a widow, has been living in Prasanthi Bhavan for the last nine years. When she moved, she brought a hanging lamp with her (see Figure 5.6). Maheswari and her husband had a plan to build a new home.

Maheswari's husband bought her this lamp to put in their new home, but the home was never built. She stated:

Now my husband is no more, we don't have children. And I am here in this place. Not even once have I lit the lamp. No... I am not going to light it in the future either. What is the point? Let it be here with me as a memory of my unbuilt home and husband.

Figure 5.6: The Lamp: Memory of an unfulfilled dream

This example from the data illustrates that cherished possessions can also be associated with sorrows and unfulfilled ambitions. The hanging lamp that Maheswari cherished is embedded with memories of her husband and their unfulfilled dreams of building a new home. This lamp represents Maheswari's and her husband's hope of having a home that would provide them with security, a higher-level schema (D'Ándrade, 1992). Thus, building a home is motivated by a desire to attain the cultural schema of security. Not all of the older people's possessions represent pride and happiness; some represent unfulfilled desires in life. Nonetheless, the cherished possessions linked to these memories give the owner a sense of comfort and connection when moving to a new place (Kroger & Adair, 2008). Maheswari explained:

Here in this old age home nobody knows about it. Even my roommates or matron do not know. I kept the lamp in a cover and put it in an iron trunk box and placed it safely in the Almirah. (cupboard) Sometimes, when I am alone in the room, I take the lamp out of the Almirah for a while to look at it. And very soon I wrap it back up and replace it again in the Almirah.

This shows how the characteristics of a place, such as the rules and regulations of a care home, also shape how older adults engage with their cherished possessions. Care home rules such as at Prasanthi Bhavan state that older adults cannot keep personal material possessions that hold monetary value such as mobile phones and gold ornaments. This rule is largely due to the lack of security and the fear of theft or abuse of the older adults living in the care home. As a result, welfare-based care homes with minimal resources and a lack of private space make it difficult for older adults to store and engage with their possessions.

5.6 Conclusion: Cherished possessions, emotions, and the wellbeing of older adults

This study, conducted in the state of Kerala, India in three different types of care homes, included older people from different socio-economic backgrounds. We collected rich ethnographic data on the lived experiences of these older adults through in-depth interviews, observations, and photography. In this paper, we attempted to answer the following questions: 1) How are possessions emotionally relevant for older people, and how do they shape material spaces in care homes? and 2) How do rules and regulations enforced by the care home influence how older people engage with their possessions? Theoretically, this study has focused on how the material and the imaginary aspects of emotions embedded in cherished possessions can contribute to homemaking practices at the scale of a formal care setting for older adults in a non-western context. We have explored the different types of cherished possessions embedded with different emotional qualities that older adults bring with them to care homes, and have looked at how these possessions influence the homemaking practices of these older adults.

Having cherished possessions can evoke memories and emotions including a sense of happiness, co-presence, love, nostalgia, pride, hope, security, and a sense of connectedness with the past. These links with the past are not just forms of nostalgia; acts of remembering, recollecting, and memorializing can play an integral role in the mental wellbeing of older adults. In line with Nord (2013), our study found that cherished possessions evoke both happiness and sorrow. While religious possessions help to create an imagined sense of co-presence and resilience when moving to a new setting (Hart, Blincow, & Thomas, 2007; Munt, 2012), items such as family photographs can become shared possessions that help to create a sense of co-presence (Baldassar, 2008; Bowlby, 2011). They can also spur opportunities to develop personal community (Spencer and Pahl, 2006), peer-to-peer relationships, and social capital within a new formal care setting. The gender roles associated with the past lives of older people are also evident through their cherished possessions. While older men (e.g., Kuruvila and John) have possessions associated with their masculine identities (Gorman-Murray, 2008), older women have personal possessions associated with the care roles expected of their gender (e.g., Alphonsa and Remani). Cherished possessions that are nostalgic in nature (Blunt, 2003) can help older adults experience a sense of pride and continuity in life (van Hoof et al., 2016). The vitality endorsed emotional qualities associated with these possessions greatly influence the homemaking practices of domesticity in formal care settings (Bennett, 2010). Through this study, we have explored the various homemaking practices and the ways these possessions are used. We argue that cultural practices motivated by schemas are reflected in homemaking practices.

This study additionally shows that the emotional expressions of research participants are more or less governed by the rules and regulations of the care homes with poorer adults unable to cherish their possessions in the same ways as wealthier care home residents. These rules and regulations shape how the older adults engage with their cherished possessions. For example, care homes catering to middle- and upper-middle-class residents are more accommodating and provide more private space for residents to install and display their personal possessions. However, in welfare-based care homes, there is no provision of private space, and the rules are far more stringent with regard to personal possessions. Thus, poorer older adults who

depend on care homes to survive have fewer opportunities and less space to engage with their possessions. Based on our data, we recommend that care homes relax these rules and encourage homemaking practices through the inclusion of possessions, as doing so would make aging a less stressful experience in institutional settings.

In the context of India, care homes for older adults are not seen in a very positive light as these facilities are perceived as places where older adults are left after being forgotten by their families. Most of the studies on care homes and the wellbeing of older adults have largely focused on medical facilities, poverty alleviation, and the services that care homes offer (HelpAge India, 2009; Liebig, 2003). Furthermore, the reproduction of familial aspects of emotion have largely been ignored in the Indian context. While the findings of this study do not have immediate benefits for the participants, they demonstrate the importance of cherished possessions to the emotional wellbeing of older adults living in care homes in Kerala, the most rapidly aging Indian state in the country.

Chapter 6⁴

***“This place is (now) my own home. It is my home till my death”:
Older adults (re)creating home through daily rhythms and
kinning in formal care settings***

⁴ This chapter is an adapted version of the following article:

Pazhoothundathil, Nikhil., & Bailey, Ajay., (2021). “This place is (now) my own home. It is my home till my death”: Older adults (re)creating home through daily rhythms and kinning in formal care settings. *Geoforum*, (March). <https://doi.org/10.1016/j.geoforum.2021.04.011>

6.1 Introduction

The transition from home to care home is a challenging process for older adults. However, various factors motivate older adults to choose formal care homes as a place which promotes their security and wellbeing. The wellbeing of older adults in a new place is determined by how older adults feel about the institutional setting as a home. In this chapter, we focus on how older adults find and create home in institutional care homes. Worldwide, older adults are especially vulnerable to abuse and neglect by their families and other caregivers. Desertion or abandonment are the most common forms of neglect faced by older adults. While physical abuse and its implications have been well documented across the world, neglect and its implications are under-researched (Shankardass, 2020; Stodolska, Parnicka, & Tobiasz-adamczyk, 2019). In an extensive review carried out by Sooryanarayana, Choo, & Hairi, (2013), neglect was widely reported and experienced by older adults. As many countries are proceeding towards a rapidly ageing population, the number of older adults potentially becoming vulnerable to abuse is also expected to increase. This is particularly the case in Asia where the population is aging at an unprecedented pace. In 2015, 11.5 percent of Asians were 60 years or older, a figure expected to rise to 24.5 percent by 2050 and 33.7 percent by 2100 (United Nations, 2019). The greatest increase in the ageing population will occur in the over 75 age bracket which is predicted to comprise 50 percent of the total older adult population in 2100 (United Nations, 2019). Sebastian & Sekher (2011) observed that older persons who are economically dependent on their children are more likely to experience verbal abuse. In low- and middle-income countries, poverty, disputes about the intergenerational transfer of resources, and patriarchal norms have a major impact on the living situations and rights of older adults. In this study, we focus specifically on how older adults living in care home who have either been abandoned or abused.

As there are no safeguards to protect vulnerable groups in India, there is growing concern that elder abuse and older adult mistreatment are increasing (Shankardass, 2020). For example, a survey conducted by HelpAge India (2014) revealed that 77 percent of older adults co-resided with their families and more than 50 percent experienced abuse and neglect from their primary caregivers including sons and daughters-in-law. Datta (2017) noted that the pattern of elderly abuse consists of “psychological abuse in terms of verbal assaults, threats and fear of isolation; physical violence; and financial exploitation” (p.84). Studies also point out that, in order to avoid abuse and mistreatment, older adults may wish to avoid their children (Rajan, Sunitha, & Arya, 2017). This scenario necessitates alternative living arrangements and the provision of safe spaces such as geriatric care homes. In 2007, the Government of India enacted the Maintenance and Welfare of Parents and Senior Citizens Act which envisages the establishment of old age homes in every district of India (Ministry of Social Justice and Empowerment, 2007); however, many older adults are not aware of any legal provisions and many parents are reluctant to complaint against their children. Many parents often refrain from taking legal recourse as they have no other place to go and must live with their children, making the situation at home more precarious.

The wellbeing of older adults in care homes is largely determined by how positively they are attached to a new place. Studies have often considered care homes to be formal spaces of care

provision and care relations (Gupta et al., 2014; Johnson et al., 2018; Kalavar, Jamuna, & Ejaz, 2013; Pathania et al., 2019, 2018) yet research has largely ignored how informal care relations and daily rhythm contribute to creating a sense of home in these settings. In this study, we examine care homes not as places of abandonment or desertion but as spaces where new relations are established and where residents have new aspirations despite any past trauma. Our aim is to understand the following question: How do older adults (re)create home through daily domestic rhythms and caregiving practices in an institutional care home?

In the Global South, formal care services for older adults are relatively new and not as common as such as in high-income regions; older adult care is often assumed to be the duty of adult children in extended family relationships (Hanrahan, 2018). Coe (2019) highlights that the emergence of formal care homes in low and middle income countries were the visible signs that a society cares for its citizens. The literature stressed the need for more empirical insight on aging and care in global south regions to realize the potential for directing new policies and programs around the geographies of aging (McQuaid et al., 2020; Wignall et al., 2019; Yankson et al., 2017).

6.2 Theoretical framework

6.2.1 Home and homemaking practices

The concept of home has been used extensively in the literature in connection with theories of place attachment and place identity; place attachment is the connection between person and place while place identity is concerned with the process of forming places as part of self-identity irrespective of the qualities and the evaluation of places (Moore, 2000). In the literature, home is generally considered to be an active place with social, economic, cultural, and emotional relationships (Chaudhury & Rowles, 2005; Easthope, 2004; Milligan, 2009; Oswald & Wahl, 2005; Stones & Gullifer, 2016). Based on meaning of home literature, Clapham (2011) argues that personal wellbeing is associated with identification and embodied activities. So, in order to promote the wellbeing of older adults, it is important to understand the important role of both the physical, material world as well as the social world. Homemaking is not an independent process disconnected from place attachment. Rather, home-making is “the ongoing process of (re) creating a home place” where “people build connections to a significant place, ground their personal experiences and embed their personal identities within it” (Meijering & Lager, 2014 p. 861). According to Easthope (2004), a place (home) is constantly linked with the physical, social, cultural, and emotive world. The meaning of home, and its material function, shift according to the different life stages of older adults. For example, a study on older women living in congregate houses revealed that older adults conceptualize and evaluate their life situation in response to their environment and so try to make a rational judgement according to available resources and the environment (Leith, 2006).

Place attachment is a result of the unique emotional experiences and bonds individuals have with places (Low & Altman, 1992). A place becomes significant for a person when the experience-in-place creates meaning (Manzo, 2005) or evokes emotions such as happiness,

pride, and love. For example, religious beliefs and practices associated with a place can result in a sense of attachment with the place (Mazumdar & Mazumdar, 2005; Sahney, 2017). Place attachment helps older adults to identify meaning, security and a sense of identity; it also helps to facilitate successful adjustment in life (Andrews & Phillips, 2005; Wiles et al., 2009). Various important life events change the role of an older adult as well as the value of the place they confront. Furthermore, there are different social norms for men and women in a patriarchal society which affect place attachment.

Personal wellbeing in a place is determined by the level of positive attachment to that place. Perhaps not surprisingly, any disruption to the physical, social, cultural or emotive attributes of a place will affect the wellbeing of older adults. When changes occur, older adults are likely to adopt coping strategies to mitigate the effect of change (Cristoforetti, Gennai, & Rodeschini, 2011). In turn, older adults develop new place attachments. For example, when an older adult moves to an institutional care setting, the physical and social characteristics of the institution could be totally new and different from pre-institutional life; different strategies are used to adjust to a new living situation and space. Older adults may retain possessions (Pazhoothundathil & Bailey, 2020) or replicate domestic activities to create a sense of home. As abandoned or deserted adults have fewer possessions and private spaces to engage with possessions, they may take on caregiving roles, use cultural practices or perform rhythmic activities on a daily basis to re-create a sense of home. Starting with daily rhythms, each is discussed in the following paragraphs.

6.2.2 Daily rhythms and domestic activities

Various studies show that daily rhythms play an integral part in building a positive aging experience (Cutchin, 2001; Lager, van Hoven, & Huigen, 2016; Marhaňkova, 2011; Rowles & Watkins, 2003). The value placed on time and place are integrated into the habitual routines and behaviors that build up everyday life (Highmore, 2002). Lager & Hoven (2016), point out that “everyday places are imbued with rhythm. The habitual and routine use of these places confers a sense of familiarity and security” (p. 1569). Rhythm is “an important constituent of the experience and organization of social time” (Edensor, 2010, p. 1). Spatial routines and habits create a sense of physical, social, and autobiographical ‘insideness’ and so play a major role in the life of older adults (Rowles, 1983). When older adults move to a care home, the continuity of daily rhythm can be disrupted (Rowles & Watkins, 2003). Additionally, decreasing energy levels and medication effects can slow down daily rhythm (Lager, van Hoven, & Huigen, 2016). In order to counteract the slowed rhythms of later life, and to experience congruity with a new place such as a care home, older adults may adopt new coping strategies—or pursue a ‘remaking of place’—to make everyday life eventful and to secure a sense of insideness (Marhaňkova, 2011; Rowles & Watkins, 2003). For example, eating together and sharing food are intrinsic daily rhythms that are part of the home and homemaking activities. In the context of the care home, we explore the concept of ‘commensality’ which is broadly defined as eating with others or eating at the same table (Fischler, 2011). In institutional settings, the cooking and sharing of food can help older adults recreate the rhythms of the domestic life they had at their former home. Commensality helps to build a sense of community among older adults. The rules of commensality determine

who can eat ‘together;’ these rules replicate rules that exist in society at large and so can be exclusionary. In care homes, the practices of commensality can lead to a semblance of family life with non-kin co-residents and caregivers.

6.2.3 Kinning as a homemaking practice

Kinning is a term used by Howell (2003) to refer to “the process by which a previously unconnected person is brought into a significant and permanent relationship with a group of people that is expressed in a kin idiom” (p. 465). Sahlins (2011) stresses that kinship is relational and performed daily through diverse activities, with caregiving being the most significant. Care negotiations involve mutual regard, emotional assistance, affection, and moral support (Baldassar, Ferrero, & Portis, 2017). Ball et al. (2009) additionally observe that positive mutual regard helps to increase a sense of trust and companionship between caretaker and care receiver.

As older adults who move to care homes are surrounded by non-kin caregivers and fellow residents, these new care relationships may evoke strong emotional bond which cause fictive kin to act as kin (Coe, 2017). These kin idioms with caregivers or other care home residents can take the form of ‘sibling,’ ‘daughter,’ ‘son’ or ‘grandchildren.’ The space for kinning between caretaker and care receivers helps to fulfill missing family ties (Ball et al., 2005; Bowers, Esmond, & Jacobson, 2000; Gass, 2004; Piercy, 2000). Thus, in this chapter we focus on caregiving activities as a process of kinning employed by older adults. In the following sections, we present our research context, methods, and results. Finally, we end with a discussion on the homemaking practices of older adults in a care home.

6.3 Research context

According to the national census, Kerala’s population in 2011 was 33,406,061; this accounts for roughly 2.75 percent of the country’s total population (Registrar General of India, 2011). The state has one of the highest proportions of older adults in the south (Registrar General of India, 2011). In fact, the growth rate of the older adult population in Kerala has increased at a rate double the overall growth rate making it higher than any other state in the country. The proportion of the older population was 12.6 percent in 2011 with an expected increase to 18.3 percent in 2026; this is higher than the national projected average of 12.4 percent (Government of India, 2006). At 75 years, Kerala also features the highest life expectancy at birth as well as the highest index of aging among India’s states with 97 older adults to 100 children (Subaiya & Dhananjay, 2011).

In 2006, Kerala was the first state in India to develop a policy for the welfare of older adults. Amended in 2013, the Old Age Policy emphasizes the need for both non-profit and for-profit care homes for older adults (Social Justice Department, 2013). According to the policy, older adult care homes should register with the Orphanage Control Board within the Social Justice Department. As of 2019, a total of 614 care homes were registered under or recognized by the Board: 599 non-governmental care homes (both non-profit and for-profit) and 15 government-run care homes (Social Justice Department, 2019). According to HelpAge India (2009), 14

percent of India's older adult care homes are located in Kerala, a state which shares only 2.76 percent of the country's population. For the current study, we collected data through in-depth interviews and observation (both participant and non-participant) between April and August 2015 at Prasanthi Bhavan (a pseudonym), a non-profit care home in the Kottayam District.

6.4.1 In-depth interviews at Prasanthi Bhavan

In-depth interviews are considered to be one of the most suitable methods for exploring personal experiences (Hennink, Hutter, & Bailey, 2011; Reichstadt et al., 2010; Robertson & Hale, 2011). To obtain rich information about life histories, we interviewed 15 older adults; one caretaker; and one administrator. Topics included homemaking practices in Prasanthi Bhavan as well as administrative procedures, rules and regulations in the care home. We recruited study participants with the prior permission of Prasanthi Bhavan administrators; we later obtained informed consent from each participant. We did not recruit participants who were sick or those with speaking difficulties. An interview guide was prepared in English and subsequently translated into Malayalam (the local language). As research participants in Prasanthi Bhavan shared rooms, interviews were conducted in communal spaces, such as the dining hall, to protect participant privacy. Each interview lasted approximately one and a half hours; interviews were conducted up to the point of data saturation.

6.4.2 Observation

Observation techniques enable researchers to: 1) systematically document the behavior, action, and interaction of people in a socio-cultural context; and 2) obtain detailed descriptions of social settings and events (Hennink, Hutter, & Bailey, 2011). Homemaking practices are cultural behaviors. Observation in this study therefore provided us with a deeper understanding of important areas of enquiry including the day-to-day functioning of a care home; the homemaking practices of older adults; and interpersonal relationships in care homes. These observations further helped to contextualize information shared in interviews. Once we received permission to conduct the study, the older adults and the administrators accepted the first author as a member of Prasanthi Bhavan; this allowed him to share lunch and tea every day; participate in serving food to older adults; and receive invitations for celebration such as the Onam festival (a regional festival in Kerala). These opportunities enabled us to conduct participant observation at the festivals and present the day-to-day details of the festival in the results section.

6.4.3 Rapport establishment process and positionality

To obtain permission for the study and generate rapport with research participants, the researcher visited Prasanthi Bhavan and interacted with most of the older adults and caretakers. The author's status as a researcher and as an educated person helped to establish credibility and trust among older adults in Prasanthi Bhavan. The researcher also shared insider-outsider characteristics with participants. For example, as a Keralite and native speaker of Malayalam, the researcher was viewed as an 'insider' who shared the mother tongue and who had the ability to understand the cultural reference points of research

participants. This insider perspective provided significant advantage in recognizing verbal and non-verbal clues and hidden assumptions underlying participant behaviors. For example, as older adults are very sensitive to the way others address them, the researcher called older women *amma* (mother) and older men *acha* (father) which is more acceptable from a cultural standpoint. On the other hand, age, sex, and profession made the researcher aware of his status as an outsider.

6.5 Data analysis

Interviews were first conducted in Malayalam and then translated into English. ATLAS.ti.7, a qualitative software package, was used for data management and analysis. Following the principles of grounded theory which involved various stages such as developing and defining codes, describing and comparing codes across code groups, and categorizing and conceptualizing to link with theory. We have applied two main cycles of coding (Hennink, Hutter, & Bailey, 2011). In the first cycle, primary codes were developed both inductively and deductively. In primary coding we labeled actions in each segment of data rather than applying pre-existing categories to the data (Charmaz, 2006). In the second cycle, code families were further developed by grouping different codes based on common attributes (see Table 6.1). In this chapter, our empirical data are presented in the form of older adult narratives. In order to protect anonymity, we used pseudonyms for care homes and the participants.

6.6 Results

Prasanthi Bhavan is a state subsidized, non-profit care home for poor and neglected older adults (see Participant Profile in Table 6.2). Situated in a village 25 kilometers from the city of Kottayam, Prasanthi Bhavan operates out of a rented, double-storied building. At the time of data collection, a total of 22 older adults resided in the care facility (12 men and 10 women). Among them, four women and two men required physical assistance to fulfill daily needs (see Chapter 2 for a description of Prasanthi Bhavan).

Table 6.1: Themes and codes identified

Themes	Codes
Reasons to enter care home	Poverty; destituteness; homelessness; neglect; abuse
Homemaking through domestic activities	Day-to-day activity; individual activity, collective activity; cleaning; community dining; washing; roam around; collecting things; farming; rearing domestic animals; preparing hot water; disruption from daily activities; religious rituals; sharing; community level care.
Homemaking through care and care-giving	Caregiving; care receiving; interpersonal relationship between older adults and caretakers; caring activity within care home; caring activity outside care home; physical care; emotional care; community level care.
Homemaking through kinning	Interpersonal relationship between older adults; interpersonal relationship between older adults and caretakers; physical care for with respect to ADLs; fictive kinship; emotional trust; intensive personal bonding; feeling of a family member; care reciprocity; wish for long term relationship.
Homemaking through the celebration of festivals	Cultural practices; cultural norms; rituals, opportunities for celebration; interpersonal relationship with neighborhood; space to aspire; collective activity; happy moments.

Table 6.2. Participant profile, duration of stay, and reasons to reach Prasanthi Bhavan

Sl no	Name	Gender/ marital status	Age	Duration of stay (years)	Reasons to reach Prasanthi Bhavan
1	Thankamani	F/ widowed	70+	3	Family negligence
2	Maheswari	F/widowed	82	9	Homeless
3	Kamalam	F/ widowed	78	3	Family negligence
4	Meenakshi	F/widowed	80	2	Family negligence
5	Sarojani	F/widowed	75	3 months	Abuse from family
6	Annamma	F/unmarried	68	4	Homeless
7	Pankajakshi	F/widowed	82	8	Homeless
8	Remani	F/married	64	2	Abuse from family
9	Kalyani	F/widowed	80+	6	Homeless
10	Thanknammal	F/widowed	90	3	Poverty
11	Radhakrishnan	M/unmarried	76	4	Homeless
12	Mohanan	M/Married	70	3	Family negligence
13	Bhaskaran Nair	M/unmarried	86	6	Homeless
14	Surendran	M/widowed	74	2	Family negligence
15	Chandran	M/unmarried	78	4	Homeless
16	Arya	Female	26	3	Caretaker
17	Kesavan	Male	55	2	Superintendent

6.6.1 Care home arrival

Destituteness, poverty, negligence or mistreatment inflicted by immediate family members are the major reasons older adults move to a care home. The following paragraphs provide a few examples on how the elderly reach Prasanthi Bhavan.

Kamalam was living alone in her small hut. Although she has three sons, each one lives with his own family and so is not ready to take responsibility for their mother. Eventually, vision problems lead Kamalam to Prasanthi Bhavan. When asked to recall her experience, Kamalam explained:

It was raining. I went out to buy some betel and I lost my way. Some school children helped me to get into a school, as the rain was getting heavy. The children informed the principal. Father [the principal] in turn called the police [...] Two lady constables [police officers] came to take me to this old age home.

Kalyani, another older adult who had no home and no one to take care of her, reached Prasanthi Bhavan through the help of a doctor and a care worker. She recalled:

I was admitted to a hospital [...] So, Basheer [a caretaker at Prasanthi Bhavan] came to the hospital with someone. The doctor told him about me. When asked, I said I am not going anywhere. I have no one to take care of me. I am not going anywhere. I will stay in the hospital. The doctor said, "There is an old age home nearby, let's take you there." [...] Basheer brought me here in a vehicle.

Destituteness was the reason for Kalyani to reach Prasanthi Bhavan, whereas Kamalam experienced negligence from her children. Neglect in the domestic setting comes in many forms, including: lack of communication; withholding food; and ignoring health problems or failing to schedule doctor visits. The care gap is due to the unmet care expectations of older adults. When describing his situation, Mohanan stated:

I became a burden for them [family] and [they] asked me to get out of the house. I worked hard for my family. All my assets, [I] utilized for this family. Now I have become a useless person for my family. They treated me like their slave. They wanted me to become their slave.

Older women are more vulnerable and so suffer the larger share of abuse. The change in power relations at home make the lives of widowed women in particular more precarious. These women have limited access to income or resources from family property and legal aid; those who do manage to take control of their assets are often abused, cheated, and abandoned by the family. Remani narrates, *"My husband is a drunkard. I have suffered a lot. After drinking he used to attack me physically. I had to also suffer the assaults of his first son from his previous marriage."*

A majority of care home residents are women from lower socio-economic backgrounds as a result of their vulnerability and inability to fight against abuse within a patriarchal family setting. Our findings show how family conflict and mistreatment act as push factors for older adults who seek shelter in care homes.

Older adults view Prasanthi Bhavan as a new space which helps to alleviate the pain and hardships of the past as well as a home that brings a sense of normalcy to the rest of their lives. Kalyani's words reflect the sense of relief and security she feels in Prasanthi Bhavan. Laughing, she stated, *"This place is my own home. It is my home till my death. With God's grace, my dear son, here I get good food. There is always non-veg food. It's a feast every day. Everyday. God brought me here."* New friendships and increased intimacy with caregivers and other residents become an important source of support and care. Domestic activities help

disenfranchised older adults to constitute and maintain a sense of daily rhythm and cultural identity.

6.6.2 Homemaking through daily rhythms

The homemaking practices of older adults include domestic activities within and outside the care home. Most activities are linked to past domestic practices performed previously. These practices are both individual and collective. Individual practices include cleaning; doing laundry; and rearing domestic animals (see Figure 6.1). Collective practices include dining; praying; cooking; and farming. The gender norms that are prevalent in the society are reflected in these domestic practices.

Here, a 75-year-old resident named Radhakrishnan describes his usual domestic activities in Prasanthi Bhavan:

I wake up in the morning before five o'clock [...] I do what feels good to do. I don't stay idle. After a black coffee in the morning, I usually roam around outside, collect firewood, areca nuts, fruit-like things from the nearby grounds [...] We use firewood to make warm water for bathing. I keep one or two areca nuts for myself and the rest of them I keep in the corner of that veranda. Usually Kalyani or Meenakshi [other care home residents] will take them from there.

It is common practice in rural Kerala to collect the coconuts, coconut leaves and fruit (such as tamarind, mangos, and jackfruit) that have fallen from the trees overnight. Fruit which has dropped in a public area is for public use. Radhakrishnan explains why he goes for walks in the early morning to collect tamarind, a tangy fruit used to make fish curry.

Those [pointing out the thick Malabar tamarind pods] are found on the street. That's why I roam around in the early morning. There are many [people] collecting them. If we are late, we won't get anything. I bring them to the kitchen, so that they can use them for cooking [...] I don't gather them for myself. They are meant for all of us, right?

The early-morning practice of collecting things is a strategy older adults use to maintain a daily rhythm in their new setting; it also illustrates the concern older adults have for the wellbeing of others. Distraction away from such domestic practices creates distress among care home residents. As Radhakrishnan explains, “*Three or four years ago we had a sir [a superintendent]. He enacted rigid rules: No shopping, no leaving the compound. We must simply sit idle. Is it possible?*” Although losing access to daily activities clearly disrupts their rhythms, care home management sometimes overrides the independence of the older adults.

Figure. 6.1: Older adults performing the everyday chores of heating water and sweeping the compound

Source: Author

This study also found that the gender roles associated with a traditional patriarchal society are reflected in domestic homemaking practices. For example, men collect gas cylinders or go out to shop or pay electricity and telephone bills; Women work in the kitchen; clean the care home and its surroundings; and rear poultry. Resident Pankajakshi's main daily activity at the care home is feeding the hens. Even though she doesn't eat eggs or chicken, she tries to recreate the practices she used to perform for her children. Pankajakshi explained:

I have one son and two daughters. I don't know where they are now. When I was young, I struggled a lot to take care of these children. I lost my husband when these children were small [...] Although I never used eggs or meat, I used to keep hens for my children. I also don't use eggs or meat here. But I don't know why I take care of these hens and roosters [...] Every morning I feed them leftovers from my breakfast. I release the rooster from the cage but keep the hens in, until they give that day's egg. I keep the eggs in the fridge [...] In the evening, I close the cage when all the hens and cocks are inside.

Praying, both individually and collectively, is one of the main daily religious practices at Prasanthi Bhavan. As many inhabitants are Hindu, a *nilavilakku* (holy lamp) is lit every evening. According to traditional beliefs, *nilavilakku* represents Lakshmi, the goddess of wealth. Families light the *nilavilakku* in the evening and pray together—an integral ritual

practice in a traditional Hindu household. Hindus view their homes as sacred places. As a result, everyday ritual practices on culturally expected auspicious time help to create a sacred ambience and ethos. Meenakshi described this sacred act by stating:

By six o'clock in the evening, the nilavilakku [holy lamp] will be lit. Usually us four, hmm... me, Remani, Maheswari, and Sarojani sit together in Remani's room and pray. Remani knows a lot of holy hymns. 'Sandyanamam,' Harinamakeerthanam, and all. She chants hymns first, then we repeat it...Arya [a caretaker] also joins us if she has time.

The domestic activities of women are concentrated within the care home and its immediate surroundings. As per the rules and regulations of Prasanthi Bhavan, older adults are not allowed to go outside alone. The management is more lenient towards men who are generally healthier and familiar with nearby locations. This opportunity gives men more freedom to move around and carry out their domestic practices. Through these domestic activities, older adults are able to link life in the care home to their past life which helps them to maintain a domestic rhythm and sense of continuity.

6.6.3 Homemaking, care and caregiving

Older adults caring for other older adults is a very common practice in Prasanthi Bhavan. Care-giving activities aids in building a common relationship among the older adults. Annamma was a tailor; who has lived at the care home for the last five years. When asked about caring for co-residents, she explained:

It [a sewing machine] was bought shortly after I came here. I expressed my wish to have a sewing machine to the then superintendent. They [the management] bought the sewing machine for me [...] I used to sew blouses and skirts for everyone here [...] I don't stitch shirts but I can do small kinds of patchwork and alterations. I did it for most of them [the male older adults]. When I see people wearing the clothes I stitch seems to suit them, it's a kind of happiness, something occupies my mind.

In the previous section, we showed how older adults create a homely atmosphere through practices that link to domestic activities carried out in the past. Here, Annamma cares for fellow older adults based on her former profession as a tailor; this helps her to bring meaning into her life, to sustain happiness in the care home, and to build intimacy with fellow Prasanthi Bhavan inhabitants. Other forms of co-care within Prasanthi Bhavan include serving food; administering medicine; preparing warm bath water; and preparing ayurvedic medicine. Older adults also provide toilet and bathroom assistance and ayurvedic oil massages. Outside Prasanthi Bhavan, care services include taking other older adults to the hospital and staying as a bystander, and helping them to get pensions. When asked to describe co-caring among older adults at Prasanthi Bhavan, Mohanan stated:

In all senses now it's my home [...] I would accompany the sick to the hospital [...] I would accompany if anyone was sick and needed to be taken to the hospital. Many

times, as a bystander. I have been to many hospitals, to the homeo-dispensary, and to the medical college. I would take them to all those hospitals [...] Yesterday I went to Kottayam with Thankamani to get her pension.

Care relationships provide an opportunity to fill the gap left by broken family ties. As the quality of care involves supporting both needs and preferences, such as emotional support and physical assistance, these kinds of care relationships influence perceptions of care quality.

Care services, not limited to helping others in need, extend to leisure and entertainment activities that create moments of happiness. Older adults in Prasanthi Bhavan regularly watch television and sing songs together. These activities help older adults overcome family neglect and gain confidence around institutional living; they also encourage older adults to hope and dream. This was described by Maheswari who stated, “*Once we went for a tour in Vagamon. Two or three years ago. I like it. Now I want to go to see the sea and I want to visit great temples.*”

6.6.4 Homemaking through kinning

The previous sections illustrated the different forms of care taking place between older adults in Prasanthi Bhavan. In this section, we focus on the role of kinning in homemaking practices. Contrary to the expected uneven power relations that are believed to exist in institutional care homes, managing staff and caretakers at Prasanthi Bhavan treat residents with a filial respect (see Table 6.3). Elements of kinning can be seen at various levels, starting from naming or referring to older adults as ‘amma’ or ‘ammachi’ (mother); ‘acha’ or ‘appa’ (father); and mama (uncle). To form strong bonds, ‘mother,’ ‘father’ or ‘uncle’ is added to the first name of the care home resident. For example, managing staff and caretakers referred to Kalyani as ‘Kalyaniamma’ (mother Kalyani) while Chandran was called Chandramama, which means uncle Chandran.

Table 6.3: Kinship terms used to build relations inside the care home

Kinship term	Meaning	Applied to
Amma	Mother	Older women
Ammachi	Mother	Older women
Acha	Father	Older men
Appan/ appachan	Father	Older men
Mama	Uncle	Older men
Mole	Daughter	Female caretakers

While studies often refer to kinning relationships between professional caretakers and care receivers (Baldassar, Ferrero, & Portis, 2017; Ball et al., 2009), kinning relations also occur between two older adults in a care setting. In our study, we observed a relatively younger care home resident taking care of a much older person. Surendran, 72, lost his father when he was a child. He met 90-year-old Narayanan in the care home and now takes care of Narayanan appan (Father) similar to his own father. to meet his daily needs. As Narayanan appan requires assistance, Surendran helps him with all of his daily needs. When asked about this relationship, Surendran explained:

I lost my father when I was a kid. He is like my father [laughing]. Often, I feel he is very close to me, like my father. I will take care of him in all his needs. I have no problem, whether it's bathing or cleaning. I used to feed him. I will have my food only after his breakfast or lunch [...] It is not only me; everybody here considers us s father and son [laughing] [...] Really, I never felt any hesitation. I am very happy to serve him. If you ask, do you help others like this? My answer is: No. I can't. I don't know the reason.

Arya, the youngest caretaker in Prasanthi Bhavan, had been working in the care home for three years when she applied for higher studies. During her time there she developed very close relationships with the older adults. On her last day, she bid farewell to each older adult in the home. She recalled:

I met all of them individually and said I am going for higher studies. I asked for their permission and blessings. All of them cried. I also cried. I am the youngest here. They see me as their child. I also consider them my grandparents [...] They arranged a small farewell get-together for me. I didn't know. Even I didn't know they bought a watch for me. At the farewell, Vargheese appachan [Father] presented me the watch. From their little savings, each of them contributed to buying this watch.

Reciprocity or care exchange between older adults and caretakers is reflected in the kinning relations. Older adults believe that it is their obligation to present a gift to their caretaker whom they considered to be their grandchild. These obligations motivated each older adult to contribute money from their small savings to buy a watch for Arya. Older adults also wish to continue their relationship with caregivers even after they have left the care home or moved elsewhere. According to Arya, “When class started, we, the new batch of students, were asked to bring a model of a clock. Vargheese appachan made a model for me. A very beautiful one. He told me if I need any such help in the future, he will do it.”

Care relationships, playing the most significant role in the kinning process, are manifested through diverse activities of care exchange and negotiation. The exchange of care develops a feeling of mutual regard and between care providers and caregivers (Baldassar, Ferrero, & Portis, 2017). The feeling of positive, mutual regard increases emotional trust and sense of fictive kinship between older adults or between older adults and caretakers (Coe, 2017). Kinning helps both care receiver and care provider to redefine the situation: a neglected

person becomes an integral part of a wider family characterized by affection, emotional support, and physical care.

6.6.5 Homemaking through celebration

The celebration of festivals is another distinct activity that promotes happiness in the life of older adults. In this section, we discuss the celebration of Onam at Prasanthi Bhavan. Onam, a traditional harvest festival in Kerala to honor the home-coming of the mythological King Mahabali, is celebrated by all ethnic and religious groups. According to the mythology:

Mahabali was a great king. During his regime, Kerala flourished with greater peace and prosperity than in heaven. Gods in heaven, who became jealous and insecure over the prosperity of Mahabali's Kingdom, planned to overthrow the King. The God Vishnu, disguised as a poor dwarf brahmin named Vamana, approached Mahabali and asked for a piece of land, which Vamana could stretch with three steps with his small feet. As soon as Mahabali agreed to fulfil Vamana's desire, the disguised god started to grow and grow until his first footstep covered the Earth and the second covered the sky. For the next step, nothing was left so Mahabali asked Vamana to place the next step on top of his head. Vishnu complied and began to push King Mahabali down into the underworld *Patahala*. Before reaching *Patahala*, Mahabali asked to be able to see his people once a year. Impressed by Mahabali's devotion to his people, Lord Vishnu granted him his wish: returning to earth once a year to visit his people and his kingdom. Every year, the great King Mahabali returns to his kingdom on *Tiruvonam*, a day during the month of *Chingam*.

According to *Kollavarsham* (the local calendar), Kerala's Onam or Tiruvonam Festival of usually occurs between the months of August and September every year; this is also the season of flowers in Kerala. Onam celebrations last for ten days, starting from the day of *Atham* to *Tiruvonam*. As in every home, Prasanthi Bhavan celebrates Onam for these ten days to honor the King Mahabali. In the following sections, we present our findings derived from participant observation conducted during fieldwork. We focus primarily on four events (see Table 6.4 for a chorological explanation of the four events) through which older adults, caretakers, and the managing staff of Prasanthi Bhavan celebrate Onam.

During the ten days of Onam, from the day *Atham* to *Tiruvonam*, older adults and caretakers begin their daily activities only after taking a morning bath. As per Hindu custom and tradition in Kerala, bathing purifies both body and mind; people may engage in any of the activities which they consider to be divine only after purifying their body and mind. During Onam, normal daily activities such as cleaning and cooking are considered to be divine. Cultural festival celebrations and the family-connected practices often remind older adults of their own families. Chandran stated, "*Here, many of them have their kids and relatives. They never come to see their amma or achan. Not even at least for onam or vishu. No. No. This is today's world.*" These words reflect elements of sorrow connected with cultural practices. "*This is today's world*" reflects the realization older adults have about the need for an alternative care home.

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Table 6.4: Chronological explanation of the four events of Onam as experienced by the older adults

Event	Meaning	Activities involved	Memories /Notes
<i>Pookkalam</i>	Floor designs with flowers laid out in front of the home	Making <i>pookkalam</i> involves activities such as cleaning the front yard of the care home, collecting and sorting flowers, designing <i>pookkalam</i> , and arranging flowers according to the design. These designs are laid every day for 10 days of Onam. Older adults collect flowers from nearby homes.	Maheswari remembers her childhood: <i>During childhood we friends used to go around the entire village to collect flowers. After that, here I do it. I liked it when I was a child. Still like it [collecting and laying out flowers].</i>
<i>Onakkodi</i>	New clothes	<p>In the afternoon on the eight day of Onam, new clothes are distributed among older adults.</p> <p>Women get <i>settu-mundu</i> (traditional clothing of women in Kerala), <i>kallimundu</i> (a kind of casual dress), a blouse and <i>thoorthu</i> (towel). Settu-mundu consists of two pieces, <i>mundu and neriyathu</i> of white clothes with colored lines at edges. Mundu is used to cover the lower part of the body, worn around the waist; and <i>neriyathu</i> is used to cover the upper part of the body over the blouse.</p> <p>Men get a shirt, <i>mundu</i> (a traditional dress), <i>kallimundu</i> and a <i>thoorthu</i> (towel).</p>	At the time of the study, a local textile merchant donated clothes to the older adults and arranged for two tailors to have the clothes stitched.
<i>Onakkalikal</i>	Entertainment	On the ninth morning after breakfast. <i>Onakkalikal</i> include a candle	Kalyani's words: <i>"Onam</i>

	and games	<p>light race, a lemon and spoon race, <i>sundarillu pottukuthal</i> (adding a dot on the forehead of the face in the picture), musical chair play, and songs.</p> <p>At the end of the games, prizes are distributed and include buckets, towels, tiffin boxes, and tea cups. After prize distribution, teacups were distributed among all the rest of the older to make sure that all residents receive at least one gift.</p>	<p><i>celebration is the happiest event. Huge celebration. Last year I participated in many events. I got two prizes. First prize for chair play. I got a cup and a tiffin box. I am waiting for the next Onam."</i></p>
<i>Onasadya</i>	Traditional Onam lunch	<p>On the tenth day as per folklore, King Mahabali visits his people on <i>Tiruvonam</i>. The main activities on Tiruvonam day are preparing <i>onasadya</i> and the communal lunch at noon.</p> <p>Older adults wear their <i>onakkodi</i>. A few women go to a nearby temple along with the caretaker Arya. Traditionally, <i>onasadya</i> is served on plantain leaf with rice and thirteen vegetable dishes and <i>payasam</i> (a traditional rice pudding). Preparing <i>onasadya</i> includes activities such as cleaning and cutting vegetables, as per the required size of each dish, cooking the dishes, collecting banana leaves from nearby banana plants, and cleaning the banana leaves. By noon, the very first <i>onasadya</i> is offered to Mahabali in front of a holy lamp. Then food is served to the older adults who are very weak or unable to sit in a group. The older adults then gather in the common dining hall and are served food by the caretakers and staff. After the older adults have partaken in their food, the management staff and caretakers are served <i>onasadya</i> by the older adults. The order of serving food is based on the practices of respect they give to the sick or most elderly.</p>	<p>On non-festival days, men were not involved in preparing food. But on <i>Tiruvonam</i> day, both older men and women in the care home actively participated in preparing <i>onasadya</i>.</p>

6.7 Discussion

In this study, we examined the homemaking practices of poor, destitute and neglected older adults living in a non-profit care home. Literature on older adult wellbeing emphasizes the benefits of aging-in-place (Black, 2008; Coleman, Kearns, & Wiles, 2016; Stones & Gullifer, 2016; Tang & Lee, 2010). It also frequently links the home and surrounding familiar environment with the physical, social, cultural and emotive world (Clapham, 2011; Easthope, 2004; Moore, 2000). Moving to an institutional care home disrupts the social and emotional engagement older adults associate with their home and other familiar environments. In the Indian context, institutional care homes are often seen as places where older adults are abandoned by family members and where poor and destitute older adults have lesser autonomy and agency in decision making. These living arrangements are also considered to be poor alternatives to co-residing with the biological family.

In care homes, older adult wellbeing is determined by how the new place satisfies psychological as well as physiological needs. Our study highlights two major roles care homes as institutions play. First, care homes provide shelter for homeless or neglected older adults. Second, care homes provide a conducive environment where older adults can recreate a sense of home through daily rhythm and caregiving activities.

The wellbeing of older adults in institutional care homes is determined by how well they develop attachments to new places. As old age is connected with lower energy levels (Lager, van Hoven, & Huigen, 2016), the place-making process of older adults is more or less limited to care homes and the surrounding environment. Homemaking practices help older adults bring normalcy into their lives (Pazhoothundathil & Bailey, 2020; Meijering, Nanninga, & Lettinga, 2016). Our study explores the homemaking activities of older adults in care homes including those carried out through domestic activities; caregiving; kinning relations; and the celebration of festivals. Domestic activities in care homes help older adults to build a rhythm in daily life. Homemaking through domestic activities is more at individual level, whereas homemaking through festival and religious celebrations are at the community level. 'Homemaking through kinning' and 'homemaking through care and care giving' are the interaction between individual and community level.

Older adults maintain daily rhythms through collective as well as individual practices. Collective practices include activities such as dining; praying; cooking; and farming. Cooking and eating together create commensality (Fischler, 2011) which helps to build a sense of family togetherness among older adults. Daily ritual practices, such as praying together during auspicious occasions, helps to create a sacred ambience and ethos in care homes (Pazhoothundathil & Bailey, 2020; Mazumdar and Mazumdar, 2009; Sahney, 2017). Individual practices include walking around care home premises; collecting materials for day-to-day usage; cleaning premises; and caring for animals. As the examples of *Radhakrishnan* and *Pankajakshi* show, their individual domestic activities benefit the whole care home. Moreover, these activities are linked to their past and also reflect gendered domestic roles. Through habitual routines and behaviors in a new setting, older adults build up daily rhythm

(Highmore, 2002; Marha'nkova', 2011; Rowles & Watkins, 2003). Habitual routines linked with the past also create a sense of continuity and personal identity (Meijering & Lager, 2014).

Care and care relationships play a significant role in deepening interpersonal relationships between older adults (Coe, 2017). Institutional care homes are perceived to be a place of formal care relationships. Within formal care institutions, older adults have largely been seen as simple care receivers. Their role as caregivers, and how caregiving processes contribute to the physical and emotional wellbeing of an elderly person, is rarely explored. Our study highlights the way informal care relationships that develop between care home residents creates a supportive and homely atmosphere in a formal care setting. Older adults voluntarily embrace the roles of caregivers and receivers. These care exchanges create new social support networks and generate feelings of kinship. Through these relationships, older adults exchange physical care as well as emotional and moral support. The everyday experience of exchanging physical as well as emotional care in a domestic space creates a sense of belonging (Coleman, Kearns, & Wiles, 2016; Howell, 2003); it also aids in healing the trauma of past neglect and abuse. The feeling of being supported and being cared for creates a sense of trust and companionship among older adults thus widens social networks (Ball et al., 2009). Reciprocity of care is also reflected in the kinning process; this process helps older adults to fill the gap of missing family ties (Ball et al., 2005; Bowers, Esmond, & Jacobson, 2000; Gass, 2004). Finally, the reproduction of family ties in a formal care setting not only helps to break up the monotony of living in an institution, it also reduces the stigma of living in a care home.

Contrary to the stigmas surrounding institutional life in India (Brijnath, 2012), this study shows that care homes provide safety and hope for older adults. Marked by abuse, negligence, and lack of agency, the past of an elderly person can be painful and traumatic. In care homes, cherished memories are made from shared moments of joy around the celebration of festivals. These opportunities for happy moments and the reproduction of family ties means that older adults perceive care homes as a much safer place than previous homes. Feeling safe, older adults are instilled with hope and so aspire for new experiences in life. Furthermore, the homemaking practices of older adults in a formal care home reflect improved agency in constituting physical, social, and autobiographical 'insideness' in a formal care setting (Lager, van Hoven, & Huigen, 2016; Rowles, 1983).

6.8 Conclusion

This study, conducted in a non-western context at a non-profit care home in the state of Kerala, is based on rich ethnographic data collected through in-depth interviews and observation on the lived experience of older adults. In this chapter, we attempted to answer the following question: How do older adults (re)create home through daily domestic rhythms and caregiving practices in an institutional care home? Taking a micro perspective in an institutional setting, we examined new forms of living arrangements; interpersonal relationships; and the kinning process. Theoretically, this study has focused on how homemaking practices—reflected in the daily rhythms, activities, care relationships and

kinning processes—help to instill a sense of belonging and ‘insideness’ (physical, social and autobiographical) in a new place. Toward this end, we explored how different types of daily rhythmic activities, care relationships, and cultural practices, which are often linked with the past and gender roles, help older adults constitute a sense of continuity in the new place. Overall, homemaking practices and new family ties help older adults overcome family neglect and break the monotony of being institutionalized. Conversely, when rigid rules and regulations over homemaking activities are imposed, older adults feel alienated and are unable to build bonds with the care home or fellow residents.

This study additionally recognizes: (1) the important role of non-profit care homes in protecting neglected older adults, especially in non-western contexts; (2) the performative roles older adults utilize to modify the care home environment to (re)create home; and (3) the need for more research on geographies of aging in global South regions to realize the potential for new policies and programs (McQuaid et al., 2020; Wignall et al., 2019; Yankson et al., 2017). Although government policies recognize the importance of care homes, in practice, care homes are still perceived to be the places where older adults are abandoned by the family. Our examples of the lived experiences of neglected older adults show that they possess more freedom and agency in care homes compared to their past. To promote the wellbeing of older adults in a care home setting, care home management must pay considerable attention to the role of homemaking practices. Theoretically, this paper contributes to new dialogues surrounding the role of rhythm, kinning and cultural practices in promoting the wellbeing of older adults in a non-western, formal care setting.

Chapter 7

Summary, conclusion and recommendations

7.1 Introduction

This final chapter draws together a summary of the key findings. Overall, this study sought to gain insight into how the process of place attachment and homemaking promotes the wellbeing of older adults living in care homes in Kerala, India. In this thesis, we look into the subjective wellbeing of older adults in terms of ‘sense of safety and security’; ‘sense of belonging’; ‘sense of autonomy and independence’; ‘sense of continuity’; and social integration. We recognize the performative roles older adults perform to recreate home in a formal care setting to (re)negotiate their identity, daily rhythms, and continuity in life. In fact, very little evidence exists in India on the place attachment and homemaking practices of older adults living in care homes. Older people’s expectations, perceptions, and behavior vary according to their socio-economic and cultural backgrounds. Therefore, in this study we chose three different types of care homes: (1) a non-profit care home for neglected and destitute older adults; (2) a for-profit as well as a religious care home for the middle-class; and (3) a for-profit care home for older adults from the upper class. Data collected through in-depth interviews provided an ‘emic’ (insider) perspective while principles of grounded theory were used to collect and analyze emerging themes. As indicated in Chapter 1, research questions 3 and 4 are inductively developed from the analysis. Research questions in this thesis were as follows:

1. What different pathways do older adults follow to institutional care homes and how are socio-economic backgrounds, culture, and gender reflected in the autonomy and decision-making processes in these pathways?
2. What motivates older adults to retain their previous homes while residing in for-profit retirement homes? How do older adults maintain previous homes? And how are these motivations linked to a sense of place attachment?
3. How do older adults engage with their cherished possessions and how do possessions help in the homemaking process and promote emotional wellbeing in care homes?
4. How do older adults (re)create home through domestic daily rhythms and caregiving practices in an institutional care home?

7.2 Summary of the main findings

This section presents the main findings from each chapter (Chapters 3-6) based on the research questions (RQ) and the empirical data. This section concludes with an inductive conceptual framework that emerges from the study’s findings (see Figure 7.1).

7.2.1 Different pathways to institutional care homes in Kerala (RQ 1)

RQ1 explored the different pathways of older adults living in different care settings in Kerala and how the decision-making process, characterized by the socio-economic position, gender and power relations that exist in the family, shape the various pathways. Older adults’ pathways towards care homes are not linear in nature but include different types of residences and serial changes in places of residence. Poverty, destituteness, abuse and negligence from family were the main reasons for older adults in Kerala to reside in a non-profit care home, as the care home provided safety and protection. Health issues, religious reasons, death of spouse, loneliness, the migration of children, unmarried status, the wish for independent living

space, and non-availability of caregivers were the main reasons that motivated older adults from better socio-economic backgrounds to select for-profit care homes. These reasons are also in line with the results of a few other studies conducted in India (Datta, 2017; Kalavar & Jamuna, 2011; Panigrahi & Syamala, 2012). This chapter identified three types of pathways for older adults: (1) Home to care home: older adults living in non-profit and for-profit care homes; experienced this pathway; (2) Home to different living arrangements and then finally reaching the care home: older adults living in non-profit care home experienced an interim living arrangement (including homes, the homes of relatives and friends, and work places) before reaching the care home; and (3) Home to various other care homes before reaching the current care home: older adults living in for-profit care homes experienced this pathway characterized by multiple care homes. As these older adults have better socio-economic status and higher autonomy in the decision-making process, they were able to choose one care home over another when problems arose. Government interventions, interpersonal relationships, and social ties played a large role in determining the quality of wellbeing of older adults (Cannuscio, Block, & Kawachi, 2003; Naumanen, Perista, & Ruonavaara, 2012). Older adults' pathways towards the care home show that autonomy and agency are interconnected with residence mobility. Older adults with better socio-economic backgrounds receive support from families to make the decision to find a suitable care home. Older adults with lower socio-economic backgrounds and lower education levels tend to possess lower levels of autonomy and so depend on the decision-making choices of others including family members, friends, government officials, and the representatives of local governments in setting the direction for place of residence. Gender roles and power relations associated with the patriarchal family system reflect in setting the direction when changing place of residence. Older women with higher levels of education and better socio-economic backgrounds show higher autonomy in the decision-making process compared to the rest of the older adults. Contrary to Indian societies' negative perception of care homes (Brijnath, 2012), middle- and upper-class older adults' preference to live in for-profit care homes over home care services shows the onset of acceptance of formal care services and the growing demand for institutional care homes in the future.

7.2.2. The motivation of older adults to retain home ownership (RQ 2).

Place attachment is the process of forming places as a part of developing one's identity (Moore, 2000). The memories and experiences associated with a place bring a stable sense of self (Scannell & Gifford, 2010). Our empirical data (Chapter 4) reveal that older adults who live in for-profit care homes show a tendency to retain and maintain their previous (family) homes. Here we also see that health issues, a need for assistance, a lack of security, the migration of children, loneliness due to the loss of a spouse, and the wish to live independently are the major reasons older adults seek out alternative residences in the form of retirement homes. Primarily, older adults retain and maintain their family homes to fulfill their familial obligation which is shaped and motivated by the cultural meaning system. Expectations, beliefs, and attitudes about ageing are culturally shaped and so reflect cultural meaning systems (D Ándrade, 1992; Mayer, 2017). Older adults perceived that it is their culturally-bounded and familial duty to retain and maintain the family home for their migrant

children and grandchildren. The process of transferring the family home from one generation to the next generation does not only ensure intergenerational wealth flow; it also maintains the family's roots and retains place identity for the coming generations. Fulfilling familial obligations is a goal shaped by the cultural meaning system which brings a sense of life-stage satisfaction and a sense of pride among older adults. Second, the study shows that older adults are emotionally attached to their family homes as home is a place embedded with memories and emotions (Blunt & Varley, 2004) and constantly linked with their emotive world (Easthope 2004). Older adults perceive that the home and its environment play a significant role in maintaining their interpersonal relationships. Owing and retaining ownership of a home helps to promote the autonomy, control, continuity, self-expression, and personal identity of older adults (Fox O'mahony & Overton, 2014). A sense of homelessness may create distress around autonomy and self-identity (Teo & Chiu, 2016). Older adults apply different strategies to maintain their homes and the possessions in their homes. Those strategies include: (1) renting out the home; (2) allowing a trusted person to reside in the home rent-free; (3) visiting often to take care of the house; (4) asking relatives or neighbors to take care of the home; (5) appointing staff to take care of the home; and (6) transferring ownership of the house to very close kin (e.g., siblings, nephews and nieces or other extended family members). In order to maintain the home, older adults try to secure a suitable care home close to their own home which reflects the proximity-seeking behavior of place attachment. A few older adults had pets at home; the presence of pets at home enables older adults to have the sense that the home remains inhabited. Furthermore, older women are keener to occasionally visit their homes and often engaged in cleaning, gardening and farming activities even with physical hardships. These occasional visits and the aligned activities give a sense of continuity between homes. Thus, these findings lead us to conclude that home plays a very significant role—socially, culturally and emotively—in older adults' life in Kerala. While retaining home brings a sense of life-stage satisfaction driven by the cultural meaning system, maintaining a family home also brings a sense of continuity in life.

7.2.3 Cherished possessions, homemaking and wellbeing (RQ 3)

The third research question—How do older adults engage with their cherished possessions and how do possessions help in the homemaking process and promote emotional wellbeing in care homes? —is answered in Chapter 5. We specifically focused on the possessions that older adults carry with them to care homes by using the theories of emotional geography (Anderson & Smith, 2001; Davidson & Milligan, 2004; Wood & Smith, 2004) and cultural schema (D Ándrade, 1992) to understand the role of cherished possessions in homemaking process in a non-normative dwelling place in non-western context. Cherished possessions evoke memories and emotions, such as a sense of happiness, co-presence, love, nostalgia, pride, hope, a sense of security, and a sense of connectedness with the past (Nord, 2013; Sherman & Dacher, 2005; van Hoof et al., 2016). The findings reveal that there are three types of cherished possessions that are embodied with different roles and emotional qualities, including: (1) religious artifacts, which signify a sense of security in day-to-day life, helped older adults to modify their physical surroundings in care homes to create a sacred ambience (Mazumdar & Mazumdar, 2009; Sahney, 2017; Seo & Mazumdar, 2011); (2) Possessions embedded with memories of past life events, places, and people that elicit a sense of pride and

a sense of continuity; and (3) Possessions, which linked to memories of family members and pets, elicit feelings of family togetherness (Rose, 2004), belonging, domesticity, and intimacy (Walsh, 2006). All of these possessions reflect efforts to create a sense of co-presence (Bowlby, 2011). In this study, older men show a tendency to cherish possessions associated with their occupation-related identities while women have personal possessions associated with the care roles expected of their gender. Older adults have different ways of engaging with their possessions. Some of these possessions are openly displayed, while others are more personal and so are hidden from public view. Possessions such as family photographs can become shared possessions that help to personalize community, peer-to-peer relationships, and social capital (Spencer & Pahl, 2006) within a new formal care setting. The ability to share their emotions about their possessions is governed by the rules and regulations of the care homes. These rules and regulations also shape how the older adults engage with their cherished possessions. For-profit care homes provide more private space for residents to install and display their possessions from their previous homes, whereas older adults in non-profit care home have fewer opportunities and less space to engage with their possessions. Thus, these results led us to conclude that, in the context of aging in a care home and irrespective of socio-economic class, the material and imaginary aspects of emotion embedded in cherished possessions contribute to attaining a sense of continuity, a sense of pride, and to creating a sense of co-presence among older adults. It is therefore important for care home management to realize the importance of cherished possessions in promoting older adults' wellbeing.

7.2.4 Daily rhythms, care giving practices and ageing in institutional care home (RQ 4)

In Chapter 6 of the thesis we raised the question how do older adults (re)create home through domestic daily rhythms and caregiving practices in an institutional care home? Earlier in Section 7.2.2 and Chapter 4, we discussed how older adults living in for-profit care homes are economically and physically capable of retaining and maintaining their family homes and possessions. But older adults living in non-profit care homes are either homeless or have no access to their home due to the negligence and abuse of family members. As a result, the homemaking practices of older adults living in non-profit care homes are mainly limited to the care home and its surroundings. Our analysis shows that homemaking practices help poor and neglected older adults bring normalcy to their lives. Homemaking practices in non-profit care homes are carried out through domestic activities, care giving roles, kinning, and cultural practices. Older adults engage, both individually as well as collectively, in domestic activities which they were familiar with in the past. Collective practices help to build a sense of family togetherness and include activities such as dining; praying; cooking; and farming. Individual domestic practices are linked with the past and gender roles and include roaming around the care home premises; collecting materials for day-to-day usage; cleaning the premises; and domesticating animals (such as keeping a chicken coop). The everyday performance of these domestic activities helps to build a habitual routine in the new place which promotes a sense of domestic rhythm and a sense of continuity in the life of older adults. Generally, older adults living in care homes are considered to be care receivers. This study result highlights the role of older adults as caregivers of fellow older adults. This informal care relation between older

adults creates a new social support system and homely atmosphere in a formal care home. The everyday exchange of physical and emotional care increases the chances of forming kin relationships between older adults which helps older adults reproduce missing family ties in a formal care home. Opportunities to engage in cultural and religious practices and festivals help to create joyful and cherished moments in a new setting. Altogether, the sense daily rhythm, sense of homely atmosphere, sense of continuity, new informal social care relations, and the reproduction of missing familial ties help older adults to constitute a sense of identity and a sense of physical, social and autobiographical inside-ness in a formal care setting.

7.2.5 Deductive-inductive conceptual framework for the study

In the first chapter (see Chapter 1) we have described the deductive conceptual frame work for the study, through which we look how the wellbeing of older adults living in institutional care home can be understood, through place attachment and homemaking practices (See Chapter 1, figure.1.1). Here in the concluding chapter, we present the deductive-inductive conceptual framework for the study based on our empirical results (see figure. 7.1). New inductive concepts that emerged from the study are: **(a) home ownership; (b) cherished possessions; (c) daily rhythm; and (d) kinning** – which enabled us to understand wellbeing of older adults in relation with place attachment and homemaking practices at different formal care settings. Chapter 4 explained that the cultural meaning system motivates older adults to retain and maintain their home for next generations as a possession for identity and pride. Older adults perceived the act of retaining home ownership for the next generation as their cultural obligation. Performing the cultural obligation brings a sense of satisfaction. Chapter 5 described about how cherished possessions contribute to the homemaking process in institutional settings. Cherished possessions are embodied with different roles and emotional qualities. Religious artifacts provide sense of security in day-to-day life. Cherished possessions embodied with memories of past life elicit a sense of pride and a sense of continuity. Cherished possessions linked to the family members and pets create a sense of co-presence. Chapter 6 explained how daily rhythm activities and kinning relations constitute homemaking practices to enable a sense of physical social and autobiographical inside-ness in a formal care setting. Older adults maintain rhythm through collective as well as individual activities and these activates also reflect the gender norms that exist in a society. Activities linked with the past help to establish a continuity in life. New kinning relation among older adults and between older adults and caretakers help to establish a new familial relation and to widen the social networks in a new place.

7.3 Theoretical and methodological reflections

The main theoretical contributions of the present thesis lie in the integration of various theories and theoretical concepts into the analysis of the themes that emerged from our empirical findings; these include place attachment; homemaking; cultural schema theory; emotional geographies; rhythms; and kinning—. Generally, ageing research in India focuses on the health and poverty issues of older adults. Institutional care of older adults is least addressed. In the Indian cultural context, institutional care for older adults was considered to be the least preferred option (Brijnath, 2012; Datta, 2017) as adult care is considered to be a

filial duty of adult children. Moreover, moving older family members to care homes gives the impression that older adults are orphaned by their families.

Figure 7.1: The deductive-inductive conceptual framework used in the study

By drawing upon theories from a wide range of disciplines to interpret the emerging themes, we were able to enrich gerontological theory by explaining the various aspects of older adult wellbeing in institutional care homes. In Chapter 4, cultural schema theory enabled us to look deeply into the motivations behind older adults retaining their homes while living in an institutional care home as well as how motivations were linked to the wellbeing of older adults. Drawing on cultural schema theory, our findings show that cultural belief systems motivated older adults to retain and maintain their previous homes for the next generations. This study makes another important contribution, namely by using theories of emotional

geographies to explain the reproduction of familial aspects of emotion embedded in cherished possessions. The study on material and the imaginary aspects of emotions embedded in cherished possessions contribute to homemaking practices at the scale of a formal care setting for older adults in a non-western context. Likewise, the use of theories on kinning and rhythm provided us with insight into the homemaking practices of neglected older adults in a non-profit care home. The study found that daily rhythmic activities, care giving roles, kinning relations and cultural practices altogether constitute homemaking practices which provide a sense of identity as well as a sense of inside-ness in a new place. The theory of kinning especially provided us new insights into the familial aspects of relations between older adults in a formal care setting.

Ageing, place attachment and homemaking are unexplored themes in a non-western context, especially in India. To holistically capture the perceptions and experiences of older adults living in care homes in India, this study used principles of grounded theory. Our approach of combining in-depth interviews, observation, and photographs enabled us to collect a rich density and variety of the perceptions and experiences regarding the relationships older adults have with different places and homemaking practices in care homes. In-depth interviews helped us to capture detailed, individual experiences and perceptions on meaning of place attachment and homemaking practices of older adults in formal care settings. Observation enabled us to systematically observe the behavior of older adults as well as the action and interactions taking place in a socio-cultural context, and to obtain detailed descriptions of social settings or events. For example, participant and non-participant observation enabled us to understand how homemaking practices are carried out through cultural events such as Onam (described in Chapter 6). Also, my position as an insider gave me an advantage in observation in recognizing non-verbal clues and hidden assumptions that underlie homemaking behavior. From a methodological point of view, a key uniqueness of the study is the use of photographs as a visual method. The main aim of the use of photography was to enrich the narratives of homemaking practices. Photography enabled us to capture a wide range of cherished possessions, homemaking activities, and study settings. The initial findings of the study came through as posters made of photographs from care homes. Before conducting the main analysis, we were able to disseminate the initial results of the study by exhibiting posters at different occasions in India and the Netherlands.

7.4 Recommendations for future research

In this thesis, we contribute to the changing perceptions and attitudes towards care homes for older adults. Along with the current research trends in ageing—looking into different aspects of poverty and health—there is a need to understand the home and familial environments that exist in non-familial settings. The findings of the study offer useful insights into the meaning and interpretation of place attachment and homemaking practices of older adults living in various care homes. This study highlights the importance of belief systems, daily rhythms, and interpersonal relationships in promoting the wellbeing of older adults. Considering that India is a nation of diverse cultures and different religions, the extent of understanding place attachment and homemaking practices is a potential area of exploration across diverse Indian cultural settings. For example, in this study we were unable to explore the perceptions and

experiences of older adults belonging to the Islamic faith—a prominent religion in India as well as in Kerala. There could be other experiences and inequalities facing this community of which we remain unaware.

One of the key findings of this study is the importance of understanding the role of daily rhythm in the life of an older adult. Studies on aging in India have hardly focused on how daily rhythms positively benefit older adults. To understand the link between daily rhythm and homemaking activities, we focused solely on older adults from rural backgrounds living in a non-profit care home. The daily activities of older adults in non-profit care homes are limited within the care home and its immediate surroundings. Moreover, the power relations between management and older adults can influence the course of daily rhythms in a non-profit care home. The daily rhythms of older adults living in for-profit care homes is likely to be influenced by: better education and knowledge of technology; economic independency, urban background and international exposure; freedom in decision making; and the availability and accessibility of a wider range of social and cultural capital. In the same way, the daily rhythms of older adults living in a multigenerational household could be influenced by care and care reciprocity between family members. We recommend that more research on the daily rhythms of older adults at different settings will help to provide deeper insights into older adults' wellbeing. Such research will also enrich the literature on rhythm theories.

7.5 Policy and intervention recommendations

This doctoral exploration has highlighted the need for older adult care institutions in India to better protect and promote the safety and wellbeing of older adults. Our findings suggest that negligence and abuse from family members cause older adults to move out of their homes. Older adults from poor socio-economic backgrounds especially are not aware of non-profit care homes. More information about the various care home options needs to be provided for older adults seeking a safe residence. Considering that India is a nation that is demographically progressing towards 'ageing' with older adult needs rapidly rising, there is a need for a separate ministry with cabinet rank at the macro level to look after senior citizen matters at both the national and state levels. Furthermore, household surveys, conducted at the national or regional levels and funded by the national or state governments, should also include the perspectives of older adults who are living in care homes. Provisions for universal pension and universal health coverage will also help older adults to reduce their dependency on younger generations. While the Maintenance and Welfare of Parents and Senior Citizens Act of 2007 proposes that at least one senior citizen care home should be established in every district, this is not yet implemented. At the national level, the government should focus on setting up at least one senior citizen care home in every district level by 2030 and at every taluk level by 2050. The government of the State of Kerala especially, with the fastest pace of population ageing in India, should focus on setting up at least one senior citizen care home at every block level by 2030 and at every panchayat level by 2040. According to the Kerala State's 'Old Age Policy,' all care homes for older adults should register with the Orphanage Control Board under the Social Justice Department. But the administrators of the for-profit care homes are hesitant to register their institutions under Orphanage Control Board as they

don't consider their residents to be orphans. Moreover, registration under the Orphanage Control Board will reinforce the already existing notion that care homes are places where older adults are abandoned by their family members. Our results indicate that there is a growing tendency among middle- and upper-middle class older adults to depend on paid institutional care homes over home care services. In this regard, macro level policy makers of both the National and State governments should consider a registration system which is applicable and acceptable to for-profit care homes.

At the micro level, this study recognizes the role of non-family members, especially government officials and local government leaders in promoting the wellbeing of older adults from lower socio-economic backgrounds. Our findings also reveal that older adults in institutional care homes are not just care receivers; their engagement in homemaking activities reflects their performative role in the place-making process. Cherished possessions and daily rhythm activities play a larger role in enabling a sense of belonging at a new place. Restrictions around cherished possessions and the practice of daily rhythms will have a negative impact on the wellbeing of older adults. Management staff must first recognize the ability of older adults to modify their living environment and then encourage older adults to engage in performative and rhythm-oriented activities such as using cherished possessions and developing kinships. Each care home should provide space for residents to display these possessions. Rhythm-making activities could be different for each older adult. Management and caretakers should also be keen to provide different activities to help older adults bring or restart their daily rhythms in a new setting.

References

- Ahlin, T., & Sen, K. (2019). Shifting duties: becoming 'good daughters' through elder care practices in transnational families from Kerala, India. *Gender, Place and Culture*, 1–20. <https://doi.org/10.1080/0966369X.2019.1681368>
- Alinejad, D. (2019). Careful Co-presence: The transnational mediation of emotional intimacy. *Social Media + Society*, 5(2), 1–11. <https://doi.org/10.1177/2056305119854222>
- Al-Jawad, M., Rashid, A. K., & Narayan, K. A. (2007). Prevalence of undetected cognitive impairment and depression in residents of an elderly care home. *Medical Journal of Malaysia*, 62(5), 375–379.
- Anderson, K., & Smith, S. (2001). Editorial: emotional geographies. *Transactions of the Institute of British Geographers*, 26, 7–10.
- Andrews, G., & Phillips, D. (2005). *Aging and Place: Perspectives, Policy, Practices*. London: Routledge.
- Bailey, A., Channakki, H. R., & Hutter, I. (2008). Place making in liminal times: A case study among Karnataka migrants in Goa. In A. Bailey (Ed.), *Culture, Risk and HIV/AIDS among migrant and mobile men in Goa, India* (pp. 171–188). Amsterdam: Rozenberg Publishers.
- Bailey, Ajay, Hallad, J., & James, K. (2018). 'They had to Go': Indian older Adults' Experiences of rationalizing and compensating the absence of migrant children. *Sustainability*, 10(6), 1–15. <https://doi.org/10.3390/su10061946>
- Balachandran, A., de Beer, J., James, K. S., van Wissen, L., & Janssen, F. (2020). Comparison of population aging in Europe and Asia using a time-consistent and comparative aging measure. *Journal of Aging and Health*, 32(5–6), 340–351. <https://doi.org/10.1177/0898264318824180>
- Baldassar, L. (2008). Missing kin and longing to be together: Emotions and the construction of co-presence in transnational relationships. *Journal of Intercultural Studies*, 29(3), 247–266. <https://doi.org/10.1080/07256860802169196>
- Baldassar, L., Ferrero, L., & Portis, L. (2017). 'More like a daughter than an employee': The kinning process between migrant care workers, elderly care receivers and their extended families. *Identities*, 24(5), 524–541. <https://doi.org/10.1080/1070289X.2017.1345544>
- Ball, M., Lepore, M. L., Perkins, M. M., Hollingsworth, C., & Sweatman, M. (2009). "They are the reason I come to work": The meaning of resident-staff relationships in assisted living. *Journal of Aging Studies*, 23(1), 37–47. <https://doi.org/10.1016/j.jaging.2007.09.006>
- Ball, M., Perkins, M., Whittington, F., Hollingsworth, C., King, S., & Combs, B. (2005). *Communities of Care: Assisted Living for African American Elders*. Baltimore: Johns Hopkins University Press.

- Bennett, J. (2010). *Vibrant Matter: A Political Ecology of Things*. Durham and London: Duke University Press
- Bhattacharyya, T., & Chatterjee, S. C. (2017). Exploring elder care in different settings in West Bengal: A psycho-social study of private homes, hospitals, and long-term care facilities. *International Journal of Psychological and Behavioral Sciences*, 11(6), 1607–1612.
- Black, K. (2008). Health and aging-in-place: Implications for community practice. *Journal of Community Practice*, 16(1), 79–95. <https://doi.org/10.1080/10705420801978013>
- Blunt, A. (2003). Collective memory and productive nostalgia: Anglo-Indian homemaking at McCluskieganj. *Environment and Planning D: Society and Space*, 21(6), 717–738. <https://doi.org/10.1068/d327>
- Blunt, A., & Dowling, R. (2006). Setting up home: An introduction. In *Home* (pp. 1–31). New York: Routledge.
- Blunt, A., & Varley, A. (2004). Geographies of home. *Cultural Geographies*, 11, 3–6. <https://doi.org/10.1191/1474474004eu289xx>
- Bomhoff, M. (2011). *Long-Lived Sociality: A Cultural Analysis of Middle-Class Older Persons' Social Lives in Kerala, India*. Leiden University.
- Bowers, B., Esmond, S., & Jacobson, N. (2000). The relationship between staffing and quality in long-term care facilities: Exploring the views of nurse aides. *Journal of Nursing Care Quality*, 14, 55–64.
- Bowlby, S. (2011). Friendship, co-presence and care: neglected spaces. *Social & Cultural Geography*, 12(6), 605–622. <https://doi.org/10.1080/14649365.2011.601264>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Brijnath, B. (2012). Why does institutionalised care not appeal to Indian families ? Legislative and social answers from urban India. *Ageing & Society*, 32, 697–717.
- Cannuscio, C., Block, J., & Kawachi, I. (2003). Social capital and successful aging: The role of senior housing. *Annals of Internal Medicine*, 139(5 II), 395–399. https://doi.org/10.7326/0003-4819-139-5_Part_2-200309021-00003
- Chan, A. (2005). Aging in Southeast and East Asia: Issues and policy directions. *Journal of Cross-Cultural Gerontology*, 20(4), 269–284. <https://doi.org/10.1007/s10823-006-9006-2>
- Charmaz, K. (2006). *Constructing Grounded Theory: A Practical Guide through Qualitative Analysis*. London: Sage Publications
- Chaudhury, H., & Rowles, G. (2005). Between the shores of recollection and imagination: self, aging and home. In H. Chaudhury & G. D. Rowles (Eds.), *Home and identity in late*

- life. International perspectives* (pp. 3–18). New York: Springer.
- Clapham, D. (2011). The embodied use of the material home: An affordance approach. *Housing, Theory and Society*, 28(4), 360. <https://doi.org/10.1080/14036096.2011.564444>
- Clark, O. (2019). “Beyond shame and sorrow”: Abandoned elderly women in India speak out. *International Journal of Aging Research*, 2(1), 2–28.
- Coe, C. (2017). Negotiating eldercare in Akuapem, Ghana: Care-scripts and the role of non-kin. *Africa*, 87(1), 137–154. <https://doi.org/10.1017/S0001972016000735>
- Coe, C. (2019). Beyond kin care? Institutional facilities in the Imaginations of older presbyterians in Southern Ghana. *Africa Today*, 65(3), 69–88.
- Cohen, L. (2000). *No aging in India: Alzheimer's, the bad family, and other modern things*. Berkeley: University of California Press, Ltd.
- Coleman, T., Kearns, R. A., & Wiles, J. (2016). Older adults' experiences of home maintenance issues and opportunities to maintain ageing in place. *Housing Studies*, 31(8), 964–983. <https://doi.org/10.1080/02673037.2016.1164834>
- Coleman, T., & Wiles, J. (2020). Being with objects of meaning: Cherished possessions and opportunities to maintain aging in place. *Gerontologist*, 60(1), 41–49. <https://doi.org/10.1093/geront/gny142>
- Coolen, H. (2008). *The meaning of dwelling features: Conceptual and methodological issues*. Delft University Press.
- Cooney, A. (2012). ‘Finding home’: A grounded theory on how older people ‘find home’ in long-term care settings. *International Journal of Older People Nursing*, 7, 188–199. <https://doi.org/10.1111/j.1748-3743.2011.00278.x>
- Creswell, J. W. (1998). *Qualilty inquiry and research design: Choosing among five traditions*. London: Thousand Oaks.
- Cristoforetti, A., Gennai, F., & Rodeschini, G. (2011). Home sweet home: The emotional construction of places. *Journal of Aging Studies*, 25(3), 225–232. <https://doi.org/10.1016/j.jaging.2011.03.006>
- Cutchin, M. P. (2001). Deweyan integration: Moving beyond place attachment in elderly migration theory. *The International Journal of Aging and Human Development*, 52, 29–44.
- Cutchin, M. P. (2003). The process of mediated aging-in-place: A theoretically and empirically based model. *Social Science and Medicine*, 57(6), 1077–1090. [https://doi.org/10.1016/S0277-9536\(02\)00486-0](https://doi.org/10.1016/S0277-9536(02)00486-0)
- D Ándrade, R. (1992). Schemas and Motivations. In R. G. D'Andrade & C. Strauss (Eds.), *Human motives and cultural models*. Cambridge: Cambridge University Press.

- Datta, A. (2017). Old age homes in India: Sharing the burden of elderly care with the family. In I. Rajan & G. Balagopal (Eds.), *Elderly Care in India: Societal and State Responses* (pp. 77–94). Singapore: Springer Nature.
- Davidson, J., & Milligan, C. (2004). Embodying emotion sensing space : Introducing emotional geographies. *Social & Cultural Geography*, 5(4), 523–532. <https://doi.org/10.1080/1464936042000317677>
- de Haas, B., & Hutter, I. (2019). Teachers’ conflicting cultural schemas of teaching comprehensive school-based sexuality education in Kampala, Uganda. *Culture, Health and Sexuality*, 21(2), 233–247. <https://doi.org/10.1080/13691058.2018.1463455>
- Easthope, H. (2004). A place called home. *Housing, Theory and Society*, 21(3), 128–138. <https://doi.org/10.1080/14036090410021360>
- Edensor, T. (2010). *Geographies of Rhythm. Nature, Place, Mobilities and Bodies*. Farnham: Ashgate.
- Falk, H., Wijk, H., Persson, L., & Falk, K. (2012). A sense of home in residential care. *Scandinavian Journal of Caring Sciences*, (27), 999–1009. <https://doi.org/10.1111/scs.12011>
- Field, E., Walker, M., Hancock, G., & Orrell, M. (2005). The needs of older people in sheltered housing: A comparison of inner city and new town areas. *Journal of Housing for The Elderly*, 19(2), 107–117. <https://doi.org/10.1300/J081v19n02>
- Finally, L., & Gouch, B. (2003). *Reflexivity: A practical Guide for Researchers in Health and Social Sciences*. Oxford: Blackwell.
- Fischler, C. (2011). Commensality, society and culture. *Social Science Information*, 50(3–4), 528–548. <https://doi.org/10.1177/0539018411413963>
- Fox O’mahony, L., & Overton, L. (2014). Asset-based welfare, equity release and the meaning of the owned home. *Housing Studies*, 30(3), 392–412. <https://doi.org/10.1080/02673037.2014.963523>
- Gallo, M. L. (2001). Immigrant workers’ journeys through a new culture: Exploring the transformative learning possibilities of photography. *Studies in the Education of Adults*, 33(2), 109–117. <https://doi.org/10.1080/02660830.2001.11661446>
- Gass, T. (2004). *Nobody’s home: Candid reflections of a nursing home aide*. Ithaca: Cornell University Press.
- Giuliani, M. (2003). Theory of attachment and place attachment. In M. Bonnes, T. Lee, & M. Bonaiuto (Eds.), *Psychological Theories for Environmental Issues* (pp. 137–170). Aldershot: Ashgate.
- Glaser, B. (1978). *Theoretical Sensitivity: Advances in Methodology of Grounded Theory*. Mill Valley, CA: Sociology Press.

- Glaser, B., & Strauss, A. (1967). *The Discovery of Grounded Theory: Strategies for Qualitative Research*. New York: Academic Press.
- Gold, S. J. (2004). Using photography in studies of immigrant communities. *American Behavioral Scientist*, 47(12), 1551–1572. <https://doi.org/10.1177/0002764204266237>
- Gorman-Murray, A. (2007). Contesting domestic ideals: Queering the Australian home. *Australian Geographer*, 38(2), 195–213. <https://doi.org/10.1080/00049180701392766>
- Gorman-Murray, A. (2008). Masculinity and the home: A critical review and conceptual framework. *Australian Geographer*, 39(3), 367–379. <https://doi.org/10.1080/00049180802270556>
- Government of India. (2006). *Population projections for India and states 2001-2026*. New Delhi.
- Gupta, A., Mohan, U., Tiwari, S. C., Singh, S. K., & Singh, V. K. (2014). Quality of life of elderly people and assessment of facilities available in old age homes of Lucknow, India. *National Journal of Community Medicine*, 5(1), 21–24.
- Hansen, E. B., & Gottschalk, G. (2006). What makes older people consider moving house and what makes them move? *Housing, Theory and Society*, 23(1), 34–54. <https://doi.org/10.1080/14036090600587521>
- Hanrahan, K. B. (2018). Caregiving as mobility constraint and opportunity: married daughters providing end of life care in northern Ghana. *Social and Cultural Geography*, 19(1), 59–80. <https://doi.org/10.1080/14649365.2016.1257734>
- Hart, A., Blincow, D., & Thomas, H. (2007). *Resilient therapy: Working with children and families*. London: Routledge. <https://doi.org/10.4324/9780203946893>
- HelpAge India. (2009). *Directory of Old Age Homes in India*. New Delhi: Policy Research and Development Department Help Age India.
- HelpAge India. (2014). *Elder abuse in India*. New Delhi: HelpAge India.
- Hennink, M., Hutter, I., & Bailey, A. (2011). *Qualitative Research Methods*. London: Sage Publications Ltd.
- Heywood, F. (2005). Adaptation: Altering the house to restore the home. *Housing Studies*, 20(4), 531–547. <https://doi.org/10.1080/02673030500114409>
- Highmore, B. (2002). *Everyday Life and Cultural Theory. An Introduction*. London: Routledge.
- Hitchings, R. (2012). People can talk about their practices. *Area*, 44(1), 61–67. <https://doi.org/10.1111/j.1475-4762.2011.01060.x>
- Holton, D. M. (2017). A place for sharing: The emotional geographies of peer-sharing in UK University halls of residences. *Emotion, Space and Society*, 22, 4–12.

- Howell, S. (2003). Kinning: the creation of life trajectories in transnational adoptive families. *Journal of the Royal Anthropological Institute*, 9(3), 465–484. <https://doi.org/10.1111/1467-9655.00159>
- Howell, S. (2007). *The kinning of foreigners: Transnational adoption in a global perspective*. New York: Berghahn Books.
- Hui Gan, G. Z., Hill, A. M., Yeung, P., Keesing, S., & Netto, J. A. (2019). Pet ownership and its influence on mental health in older adults. *Aging and Mental Health*, 0(0), 1–8. <https://doi.org/10.1080/13607863.2019.1633620>
- International Institute for Population Sciences (IIPS), NPHCE, MoHFW, Harvard T. H. Chan School of Public Health, & University of Southern California. (2020). *Longitudinal Ageing Study in India (LASI) Wave 1, 2017-18, India Report*. Mumbai.
- Izuhara, M. (2000). Changing family tradition: Housing choices and constraints for older people in Japan. *Housing Studies*, 15(1), 89–110. <https://doi.org/10.1080/02673030082496>
- Jahangir, S., Nikhil, P.N.N., Bailey, A., & Datta, A. (2018). Contextualizing elder abuse and neglect in institutional and home settings: Case studies from India. In M. K. Shankardass & I. Rajan (Eds.), *Abuse and Neglect of the Elderly in India* (pp. 175–188). Singapore: Springer Nature. https://doi.org/10.1007/978-981-10-6116-5_11
- Jamuna, D. (2003). Issues of elder care and elder abuse in the Indian context. *Journal of Aging & Social Policy*, 15(2–3), 125–142. <https://doi.org/10.1300/J031v15n02>
- Johnsen, S., May, J., & Cloke, P. (2008). Imag(in)ing “homeless places”: Using auto-photography to (re)examine the geographies of homelessness. *Area*, 40(2), 194–207. <https://doi.org/10.1111/j.1475-4762.2008.00801.x>
- Johnson, S., Madan, S., Vo, J., & Pottkett, A. (2018). A qualitative analysis of the emergence of long term care (Old Age Home) sector for seniors care in India: Urgent call for quality and care standards. *Ageing International*, 43(3), 356–365. <https://doi.org/10.1007/s12126-017-9302-x>
- Kalavar, J. M., & Jamuna, D. (2011). Aging of Indian women in India: The experience of older women in formal care homes. *Journal of Women & Aging*, 23(3), 203–215. <https://doi.org/10.1080/08952841.2011.587730>
- Kalavar, J. M., Jamuna, D., & Ejaz, F. K. (2013). Elder abuse in India: Extrapolating from the experiences of seniors in India’s “Pay And Stay” homes. *Journal of Elder Abuse and Neglect*, 25(1), 3–18. <https://doi.org/10.1080/08946566.2012.661686>
- Kavita, B., Bipin, P., & Geeta, K. (2012). A study to assess the availability of basic facilities for inmates in geriatric home, Ahmedabad, Gujarat, India. *National Journal of Community Medicine*, 3(3), 408–413.
- Klaassens, M., & Meijering, L. (2015). Experiences of home and institution in a secured nursing home ward in the Netherlands : A participatory intervention study. *Journal of*

Aging Studies, 34, 92–102.

Krause-Parello, C. A. (2012). Pet ownership and older women: The relationships among loneliness, pet attachment support, human social support, and depressed mood. *Geriatric Nursing*, 33(3), 194–203. <https://doi.org/10.1016/j.gerinurse.2011.12.005>

Kroger, J., & Adair, V. (2008). Symbolic meanings of valued personal objects in identity transitions of late adulthood. *Identity: An International Journal of Theory and Research*, 8(1), 5–24. <https://doi.org/10.1080/15283480701787251>

Kumari Bhat, A., & Dhruvarajan, R. (2002). Ageing in India: Drifting intergenerational relations, challenges and options. *Ageing and Society*, 21(05), 621–640. <https://doi.org/10.1017/S0144686X0100842X>

Lager, D., van Hoven, D., & Huigen, P. (2016). Rhythms , ageing and neighbourhoods. *Environment and Planning A*, 48(8), 1565–1580. <https://doi.org/10.1177/0308518X16643962>

Lamb, S. (2009). *Aging and the Indian Diaspora: Cosmopolitan Families in India and Abroad*. Bloomington, USA: Indiana University Press.

Lamb, S. (2010). Rethinking the generation gap: Age and agency in middle-class Kolkata. *Journal of Aging, Humanities, and the Arts*, 4(2), 83–97.

Lamb, S. (2013a). In/dependence, intergenerational uncertainty, and the ambivalent state: Perceptions of old age security in India. *South Asia: Journal of South Asia Studies*, 36(1), 65–78. <https://doi.org/10.1080/00856401.2012.732552>

Lamb, S. (2013b). Personhood, appropriate dependence, and the rise of eldercare institutions in India. In C. Lynch & J. Danely (Eds.), *Transitions and Transformations: Cultural Perspectives on Aging and the Life Course* (pp. 171–187). New York: Berghahn.

Latham, A. (2003). Research, performance, and doing human geography: Some reflections on the diary-photograph, diary-interview method. *Environment and Planning A*, 35(11), 1993–2017. <https://doi.org/10.1068/a3587>

Leith, K. H. (2006). “Home is where the heart is or is it?”. A phenomenological exploration of the meaning of home for older women in congregate housing. *Journal of Aging Studies*, 20(4), 317–333. <https://doi.org/10.1016/j.jaging.2005.12.002>

Liebig, P. (2000). Using home modifications to promote self-maintenance and mutual care: The case of old-age homes in india. *Physical and Occupational Therapy in Geriatrics*, 16(3), 79–99.

Liebig, P. (2003). Old-age homes and services: Old and new approaches to aged care. *Journal of Aging & Social Policy*, 15(2–3), 159–178. https://doi.org/10.1300/J031v15n02_10

Low, S. M., & Altman, I. (1992). Place attachment : A conceptual inquiry. In I. Altman & S. M. Low (Eds.), *Place Attachment* (pp. 1–12). New York: Plenum Press.

- Madianou, M. (2016). Ambient co-presence: Transnational family practices in polymedia environments. *The Routledge Companion to Digital Ethnography*, 2, 183–201.
- Manzo, L. C. (2005). For better or worse: Exploring multiple dimensions of place meaning. *Journal of Environmental Psychology*, 25(1), 67–86.
<https://doi.org/10.1016/j.jenvp.2005.01.002>
- Marcoux, J. S. (2001). The “Casser Maison” ritual: Constructing the self by emptying the home. *Journal of Material Culture* (Vol. 6, pp. 213–235).
<https://doi.org/10.1177/135918350100600205>
- Marhańkova, J. (2011). Leisure in old age: Disciplinary practices surrounding the discourse of active ageing. *International Journal of Ageing and Later Life*, 6, 5–32.
- Maslow, A. H. (1955). *Motivation and Personality*. Harper & Row Publishers
- Mayer, A. (2017). *Old Age – Home? Middle-Class Senior Citizens and New Elderscapes in Urban India*. Heidelberg University.
- Mazumdar, S., & Mazumdar, S. (2005). Home in the context of religion for elderly hindus in India. In G. Rowels & H. Chaudhury (Eds.), *Home and Identity in Late Life: International perspectives* (pp. 81–110). New York: Springer Publishing Company.
- Mazumdar, S., & Mazumdar, S. (2009). Religion, immigration, and home making in diaspora: Hindu space in Southern California. *Journal of Environmental Psychology*, 29(2), 256–266. <https://doi.org/10.1016/j.jenvp.2008.07.004>
- McQuaid, K., Esson, J., Gough, K. V., & Wignall, R. (2020). Navigating old age and the urban terrain: Geographies of ageing from Africa. *Progress in Human Geography*, 20(10), 1–20. <https://doi.org/10.1177/0309132520948956>
- Meijering, L., & Lager, D. (2014). Home-making of older Antillean migrants in the Netherlands. *Ageing and Society*, 34(5), 859–875.
<https://doi.org/10.1017/S0144686X12001377>
- Menezes, S., & Thomas, T. M. (2018). Status of the elderly and emergence of old age homes in India. *International Journal of Social Sciences and Management*, 5(1), 1–4.
<https://doi.org/10.3126/ijssm.v5i1.18972>
- Miller, D. (1998). *Material Cultures : Why some things matter*. London: UCL Press Limited.
- Milligan, C. (2009). *There’s No Place Like Home. Place and Care in an Ageing Society*. Farnham, UK: Ashgate.
- Ministry of Social Justice and Empowerment. (2007). *The Maintenance and Welfare of Parents and Senior Citizens Act*. New Delhi.
- Moore, J. (2000). Placing home in context. *Journal of Environmental Psychology*, 20(3), 207–217. <https://doi.org/10.1006/jevp.2000.0178>

- Mulhall, A. (2003). In the field: Notes on observation in qualitative research. *Journal of Advanced Nursing*, 41(3), 306–313. <https://doi.org/10.1046/j.1365-2648.2003.02514.x>
- Munt, S. R. (2012). Journeys of resilience: The emotional geographies of refugee women. *Gender, Place & Culture*, 19(5), 555–577. <https://doi.org/10.1080/0966369X.2011.610098>
- Nair, S., & Kumar, S. (2017). Ageing in Kerala: Some key issues. *Indian Journal of Gerontology*, 31(2), 209–238.
- Naumanen, P., Perista, P., & Ruonavaara, H. (2012). Homes as old age security? Households' perceptions of housing and elderly care in Finland and Portugal. *International Journal of Housing Policy*, 12(1), 47–68. <https://doi.org/10.1080/14616718.2012.651322>
- Nord, C. (2013). A day to be lived. Elderly peoples' possessions for everyday life in assisted living. *Journal of Aging Studies*, 27(2), 135–142. <https://doi.org/10.1016/j.jaging.2012.12.002>
- Oswald, F., & Wahl, H. W. (2005). Dimensions of the meaning of home in later Life. In G. D. Rowles & H Chaudhury (Eds.), *Home and identity in Late Life: international perspectives* (pp. 21–46). New York: Springer Publishing Company.
- Pain, H. (2012). A literature review to evaluate the choice and use of visual methods. *International Journal of Qualitative Methods*, 11(4), 303–319. <https://doi.org/10.1177/160940691201100401>
- Panigrahi, A., & Syamala, T. (2012). *Living Arrangement Preferences and Health of the Institutionalised Elderly in Odisha*. Working Paper No 291. Institute for Social and Economic Change. Bangalore.
- Park, S., Han, Y., Kim, B., & Dunkle, R. E. (2015). Aging in place of vulnerable older adults: Person-environment fit perspective. *Journal of Applied Gerontology*, 1–24. <https://doi.org/10.1177/0733464815617286>
- Pathania, A., Haldar, P., Kant, S., Gupta, S. K., Pandav, C. S., & Bachani, D. (2018). Prevalence of fall, and determinants of repeat incidents of fall in older persons living in old age homes in the national capital territory of Delhi, India. *National Medical Journal of India*, 31(6), 329–333. <https://doi.org/10.4103/0970-258x.262912>
- Pathania, A., Haldar, P., Kant, S., Gupta, S. K., Pandav, C. S., & Bachani, D. (2019). Prevalence of anemia among elderly persons residing in old age homes in national capital territory, Delhi, India. *Indian Journal of Public Health*. https://doi.org/10.4103/ijph.IJPH_412_18
- Pazhoothundathil, N., & Bailey, A. (2020). Cherished possessions, home-making practices and aging in care homes in Kerala, India. *Emotion, Space and Society*, 36(May), 1–9. <https://doi.org/10.1016/j.emospa.2020.100706>
- Piercy, K. (2000). When it is more than a job: Close relationships between home health aides and older clients. *Journal of Aging and Health*, 12, 362–387.

- Rajan, I., & Balagopal, G. (2017). Caring India: An Introduction. In I. Rajan and G. Balagopal (Eds.), *Elderly Care in India: Societal and State Responses* (pp. 1–36). Singapore: Springer Nature.
- Rajan, I., Sunitha, S., & Arya, U. (2017). Elder care and living arrangement in Kerala. In *Elderly Care in India: Societal and State Responses* (pp. 95–116). Singapore: Springer Nature.
- Rajan, I., & Zachariah, K. C. (2019). *Emigration and remittances: New evidences from the Kerala Migration Survey 2018*. Working Paper No 483. Centre for Development Studies. Thiruvananthapuram.
- Rajan, S. I., Sarma, P. S., & Mishra, U. S. (2003). Demography of Indian aging, 2001-2051. *Journal of Aging & Social Policy*, 15(2–3), 11–30. https://doi.org/10.1300/J031v15n02_02
- Rajan, S. I. (2002). Home away from home. *Journal of Housing For the Elderly*, 16(1–2), 125–150. <https://doi.org/10.1300/J081v16n01>
- Registrar General of India. (2011). *Census Report*. New Delhi.
- Reichstadt, J., Sengupta, G., Depp, C. A., Palinkas, L. A., & Jeste, D. V. (2010). Older adults' perspectives on successful aging: qualitative interviews. *American Journal of Geriatric Psychiatry*, 18(7), 567-575. <https://doi.org/10.1097/JGP.0b013e3181e040bb>
- Rhodes, T., & Fitzgerald, J. (2006). Visual data in addictions research: Seeing comes before words? *Addiction Research and Theory*, 14(4), 349–363. <https://doi.org/10.1080/16066350600826180>
- Robertson, L., & Hale, B. (2011). Interviewing older people; relationships in qualitative research. *Internet Journal of Allied Health Sciences & Practice*, 9(3), 1–8.
- Robson, C. (2002). *Real world research: A resource for social scientists and practitioner-researcher*. Oxford: Blackwell.
- Rose, G. (2003). Family photographs and domestic spacings: A case study. *Transactions of the Institute of British Geographers*, 28(1), 5–18. <https://doi.org/10.1111/1475-5661.00074>
- Rose, G. (2004). “Everyone’s cuddled up and it just looks really nice”: An emotional geography of some mums and their family photos. *Social and Cultural Geography*, 5(4), 549–564. <https://doi.org/10.1080/1464936042000317695>
- Rowles, G. (1983). Place and personal identity in old age: observations from Appalachia. *Journal of Environmental Psychology*, 3, 299–313.
- Rowles, G., & Watkins, J. (2003). History, habit, heart and hearth: on making spaces into places. In W. Schaie K, H. W. Wahl, H. Mollenkopf, & F. Oswald (Eds.), *Aging Independently. Living Arrangements and Mobility* (pp. 77–96). New York: Springer Publishing Company.

- Rubinstein, R. L. (1989). The home environments of older people: A description of the psychosocial processes linking person to place. *Journal of Gerontology*, 44(2), S45–S53. <https://doi.org/10.1093/geronj/44.2.S45>
- Rutagumirwa, S. K. (2018). *Aging and Gender in Tanzania: Uncovering the cultural schemas, nexus of identities and the Aging Body*. University of Groningen.
- Sahlins, M. (2011). What kinship is (part one). *Journal of the Royal Anthropological Institute*, 17(1), 2–19. <https://doi.org/10.1111/j.1467-9655.2010.01666.x>
- Sahney, P. (2017). Pavitra Hindu homes: Producing sacred purity in domestic diasporic settings. *South Asian History and Culture*, 8(4), 493–507. <https://doi.org/10.1080/19472498.2017.1371507>
- Samuel, R., McLachlan, C. S., Mahadevan, U., & Isaac, V. (2016). Cognitive impairment and reduced quality of life among old-age groups in Southern Urban India: Home-based community residents, free and paid old-age home residents. *QJM: An International Journal of Medicine*, 109(10), 653–659. <https://doi.org/10.1093/qjmed/hcw040>
- Scannell, L., & Gifford, R. (2010). Defining place attachment: A tripartite organizing framework. *Journal of Environmental Psychology*, 30, 1–10. <https://doi.org/10.1016/j.jenvp.2009.09.006>
- Sebastian, D., & Sekher, T. V. (2011). Extent and nature of elder abuse in Indian families: a study in Kerala. *Helpage India-Research & Development Journal*, 17, 20–28.
- Sebastian, D., & Sekher, T. V. (2018). Are elderly people safe in their own households? New evidence from seven states of India. In M. K. Shankardass and I. Rajan (Eds.), *Abuse and Neglect of the Elderly in India* (pp. 157–174). Singapore: Springer. https://doi.org/10.1007/978-981-10-6116-5_10
- Seo, Y. K., & Mazumdar, S. (2011). Feeling at home: Korean Americans in senior public housing. *Journal of Aging Studies*, 25, 233–242. <https://doi.org/10.1016/j.jaging.2011.03.008>
- Shankardass, M. K. (2020). Reflections on elder abuse and mistreatment in India. In M. K. Shankardass (Ed.), *International Handbook of Elder Abuse and Mistreatment* (pp. 371–384). Singapore.
- Sherman, E., & Dacher, J. (2005). Cherished objects and the home: Their meaning and roles in late life. In G. D. Rowles & H. Chaudhury (Eds.), *Home and Identity in Late Life: International Perspectives* (pp. 63–79). New York: Springer.
- Smith, A. E. (2009). *Aging in Urban Neighborhoods: Place Attachment and Social Exclusion*. Bristol: The Policy Press.
- Smith, J. S., & White, B. N. (2004). Detached from their home land: The Latter -Day Saints of Chihuahua, Mexico. *Journal of Cultural Geography*, 21(2), 57–76.

- Social Justice Department. (2013). *Old Age Policy for State of Kerala :2013*. Thiruvananthapuram.
- Social Justice Department. (2019). Old age homes in Kerala. Retrieved from <http://sjd.kerala.gov.in/DOCUMENTS/Downloadables/OTHERS/30681.pdf>
- Sooryanarayana, R., Choo, W. Y., & Hairi, N. N. (2013). A review on the prevalence and measurement of elder abuse in the community. *Trauma, Violence, and Abuse*, 14(4), 316–325. <https://doi.org/10.1177/1524838013495963>
- Spencer, L., & Pahl, R. (2006). *Rethinking Friendship: Hidden Solidarities Today*. Princeton: Princeton University Press.
- Srivastava, A., & Mohanty, S. K. (2012). Poverty among elderly in India. *Social Indicators Research*, 109(3), 493–514. <https://doi.org/10.1007/s11205-011-9913-7>
- Stevens, D., Camic, P. M., & Solway, R. (2019). Maintaining the self: meanings of material objects after a residential transition later in life. *Educational Gerontology*, 45(3), 214–226. <https://doi.org/10.1080/03601277.2019.1601832>
- Stodolska, A., Parnicka, A., & Tobiasz-adamczyk, B. (2019). Exploring elder neglect : New theoretical perspectives and diagnostic challenges, 60(6), e438-e448. <https://doi.org/10.1093/geront/gnz059>
- Stones, D., & Gullifer, J. (2016). “At home it’s just so much easier to be yourself”: Older adults’ perceptions of ageing in place. *Ageing and Society*, 36(3), 449–481. <https://doi.org/10.1017/S0144686X14001214>
- Strauss, A., & Quinn, N. (1997). *A Cognitive Theory of Cultural Meaning*. Cambridge University Press.
- Strauss, A., & Corbin, J. (1998). *Basics of Qualitative Research: Grounded Theory Procedures and Techniques*. Thousand Oaks, CA: Sage Publications.
- Subaiya, L., & Dhananjay, W. (2011). *"Demographics of Population Ageing in India: Trends and Differentials, BKPAI Working Paper No. 1*. United Nations Population Fund (UNFPA), New Delhi.
- Sung, K. T. (2001). Elder respect: Exploration of ideals and forms in East Asia. *Journal of Aging Studies*, 15(1), 13–26. [https://doi.org/10.1016/S0890-4065\(00\)00014-1](https://doi.org/10.1016/S0890-4065(00)00014-1)
- Tang, F., & Lee, Y. (2010). Home- and community-based services utilization and aging in place. *Home Health Care Services Quarterly*, 29(July 2015), 138–154. <https://doi.org/10.1080/01621424.2010.511518>
- Teo, P. L., & Chiu, M. Y.-L. (2016). An ecological study of families in transitional housing – ‘housed but not homed.’ *Housing Studies*, 31(5), 560–577. <https://doi.org/10.1080/02673037.2015.1106064>

- Twigger-Ross, C. L., & Uzzell, D. L. (1996). Place and identity process. *Journal of Environmental Psychology*, 16, 205–220. <https://doi.org/10.1006/jevp.1996.0017>
- Ugargol, A. P., & Bailey, A. (2018). Family caregiving for older adults: gendered roles and caregiver burden in emigrant households of Kerala, India. *Asian Population Studies*, 14(2), 194–210. <https://doi.org/10.1080/17441730.2017.1412593>
- Ugargol, A. P., & Bailey, A. (2020). Reciprocity between older adults and their care-givers in emigrant households of Kerala, India. *Ageing and Society*, 1–27. <https://doi.org/10.1017/S0144686X19001685>
- UNFPA. (2011). *Report on Status of Elderly in Selected States of India*. New Delhi.
- United Nations. (2015). *World Population Prospects: The 2015 Revision*. New York. NY: Department of Economic and Social Affairs, United Nations.
- United Nations. (2017). *World Population Ageing 2017*. New York. NY: Department of Economic and Social Affairs, United Nations.
- United Nations. (2017). *World Population Prospects: The 2017 Revision, Key Findings and Advance Tables*. New York. NY: Department of Economic and Social Affairs, United Nations.
- United Nations. (2019). *World Population Prospects 2019*: New York. NY: Department of Economic and Social Affairs, United Nations.
- Vaisey, S. (2009). Motivation and justification: A dual-process model of culture in action. *American Journal of Sociology*. <https://doi.org/10.1086/597179>
- van den Hoonaard, D. K. (2009). Experiences of Living Alone: Widows' and Widowers' Perspectives. *Housing Studies*, 24(6), 737–753. <https://doi.org/10.1080/02673030903203015>
- van Hoof, J., Janssen, M. L., Heesakkers, C. M. C., van Kersbergen, W., Severijns, L. E. J., Willems, L. A. G., & Nieboer, M. E. (2016). The importance of personal possessions for the development of a sense of home of nursing home residents. *Journal of Housing For the Elderly*, 30(1), 35–51. <https://doi.org/10.1080/02763893.2015.1129381>
- Varley, A. (2008). A place like this? Stories of dementia, home, and the self. *Environment and Planning D: Society and Space*, 26(1), 47–67. <https://doi.org/10.1068/d3105>
- Walsh, K. (2006). “Dad says I’m tied to a shooting star!” Grounding (research on) British expatriate belonging. *Area*, 38(3), 268–278. <https://doi.org/10.1111/j.1475-4762.2006.00687.x>
- Walsh, K. (2011). Migrant masculinities and domestic space: British home-making practices in Dubai. *Transactions of the Institute of British Geographers*, 36(4), 516–529. <https://doi.org/10.1111/j.1475-5661.2011.00442.x>
- Wight, I. (2012). Place, Place-making and Planning: An Integral Perspective with Wellbeing in

- (Body) Mind (and Spirit). In S. Atkinson, S. Fuller, & J. Painter (Eds.), *Wellbeing and Place* (pp. 231–247). Surrey: Ashgate.
- Wignall, R., McQuaid, K., Gough, K. V., & Esson, J. (2019). ‘We built this city’: Mobilities, urban livelihoods and social infrastructure in the lives of elderly Ghanaians. *Geoforum*, 103(May), 75–84. <https://doi.org/10.1016/j.geoforum.2019.03.022>
- Wiles, J. L., Allen, R. E. S., Palmer, A. J., Hayman, K. J., Keeling, S., & Kerse, N. (2009). Older people and their social spaces: a study of well-being and attachment to place in Aotearoa New Zealand. *Social Science & Medicine* (1982), 68(4), 664–671. <https://doi.org/10.1016/j.socscimed.2008.11.030>
- Wood, N., & Smith, S. J. (2004). Instrumental routes to emotional geographies. *Social & Cultural Geography*, 5(4), 533–548. <https://doi.org/10.1080/1464936042000317686>
- Woodward, I. (2001). Domestic Objects and the Taste Epiphany. *Journal of Material Culture*, 6(2), 115–136. <https://doi.org/10.1177/135918350100600201>
- Yadav, B. (2019). Feminization of Ageing in India: Empirical Evidences and Challenges. *Indian Journal of Gerontology*, 33(3), 280–291.
- Yankson, P. W. K., Gough, K. V., Esson, J., & Amankwaa, E. F. (2017). Spatial and social transformations in a secondary city: the role of mobility in Sekondi-Takoradi, Ghana. *Geografisk Tidsskrift - Danish Journal of Geography*, 117(2), 82–92. <https://doi.org/10.1080/00167223.2017.1343672>
- Zachariah, K. C. (2016). *Religious Denominations of Kerala*. Working paper No 468. Centre for Development Studies. Thiruvananthapuram.
- Zachariah, K. C., Mathew, E. T., & Rajan, S. I. (2000). *Socio-Economic and Demographic Consequences of Migration in Kerala*. Working Paper No.303. Centre for Development Studies. Thiruvananthapuram.
- Zachariah, K. C., & Rajan, S. I. (2012). *Inflexion in Kerala’s Gulf Connection: Report on Kerala Migration Survey 2011*. Working Paper No. 450. Centre for Development Studies Thiruvananthapuram.
- Zhang, Y., & Goza, F. W. (2006). Who will care for the elderly in China? A review of the problems caused by China’s one-child policy and their potential solutions. *Journal of Aging Studies*, 20(2), 151–164. <https://doi.org/10.1016/j.jaging.2005.07.002>

APPENDICES:

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Participants profile and history of residence*

Si. No	Name	Age	Gender	Marital Status	Last place of residence	No. of residences lived in last 5 years
Trinity						
1	Pushpa	60	Female	Married. Married to Kurian	Care home in Alappuzha	5+
2	Kurian	78	Male	Widowed and remarried. Married to Pushpa	Care home in Alappuzha	5+
3	Alice	84	female	Unmarried	Home in Kottayam	2
4	Molamma	81	Female	widowed	Home	4
5	Sunny	79	Male	unmarried	Care home in Kottayam	4
6	Elsamma	74	female	widowed	Home in Pathanamthitta	2
7	Moly	74	female	widowed	Home in Kottayam	2
8	Stephen	82	Male	Married to Philomina	Home in Kottayam	3
9	Philomina	80	Female	Married to Stephen	Home in Kottayam	3
10	Mary	79	female	Widowed	With daughter at United States	5
11	Nainan	88	male	Widowed	Home in Chennai	4
12	Mathew	77	male	widowed	At home in Kottayam	2
13	Abhaya (care taker)	48	female			
Sahya						
14	Kuruvila	80	Male	Widowed	With son and family in Abu Dhabi	3
15	Thresyamma	82	Female	Unmarried	Care home in Alappuzha	5+
16	Komalam	80	Female	Married to John	Home in Visakhapatanam	2
17	John	90	Male	Married to Komalam	Home in Visakhapatanam	2
18	Alexander	74	Male	Married to Theresa	Home in Pathnanam thitta	3
19	Theresa	70	female	Married to Alexander	Home in Pathanamthitta	3
20	Alphonsa	72	female	Married to Jacob	Home in Kottayam	3
21	Jacob	85	Male	Married to Alphonsa	Home in Kottayam	3

22	Omana	78	Female	Widowed	At home in Idukki district	3+
23	Kathrinamma	82	female	Widowed	Home in Wayanad	2
24	Veena (care taker)	32	Female			

Prasanthi Bhavan

25	Thankamani	65+	Female	widowed	Sister's home	3
26	Maheswari	74	Female	widowed	Brother in law's home	2
27	Kamalam	78	Female	widowed	Home	2
28	Meenakshi	80	Female	widowed	Home	2
29	Sarojani	75	Female	Widowed	home	2
30	Marykutti	68	Female	Unmarried	At Brothers home in Pathanamthita	3
31	Kuttiyamma	82	Female	Widowed	Home	2
32	Remani	64	Female	Married	Mahila Mandiram (a kind of shelter home for women)	3
33	Radhakrishnan	76	Male	Unmarried	Home with brother	2
34	Bhaskaran	70	Male	Married	Siblings home	5
35	Thankammal	90	Female	Married	With Grandson	2
36	Bhaskaran nair	86	Male	Unmarried	former employer's home	3
37	Kalyani		Female	Widowed	Hospital	3
38	Sureswaran	74	Male	Widowed	Home in Alappuza	2
39	Chandran	78	Male	Unmarried	At niece's home	3
40	Arya (care taker)		Female			
41	Kesavan (care taker)		Male			

* To maintain anonymity, pseudonyms were used for each care home and for the research participants.

Posters:

Ageing in Institutional Settings (non-profit care home)

Ageing in Institutional Settings

Kottayam, Kerala, India, 2015

Government Old Age Home

Government older adult care institution (Old Age Home) comes under the Social Justice Department, Government of Kerala. This care home admits both men and women from socially and economically vulnerable sections of the society. Residents receive free care services such as food, shelter, clothes and basic health care services.

The care home is a two storied concrete structure functioning in a rented building. The ground floor is meant for women and men use the first floor.

While three women share a room in the ground floor, men have a dormitory system on the first floor. Each floor has a common toilet facility. A computerized office room, kitchen, dining room and a store room/working room are at the first floor.

The home is run by a superintendent, a matron and an office assistant. The support staff includes a watchman, three cooks and two care attendants. The latter are paid daily wages whereas the rest the government employs.

Ageing in a Globalizing World

Lamp

A cherished possession in memory of an unfulfilled dream

"We, me and my husband, had a dream to build a new house for us. To have a new house was my everlasting ambition. One day I asked my husband to buy a new lamp for our new home, which we were going to build. That evening the same day he bought a new lamp and gave it to me. Ah ah... When I opened the cover I saw it was not the kind of lamp I meant. I meant a traditional lamp which we used to light up with fire every day in the morning and evening. What he bought was a hanging lamp. I didn't say anything and I didn't ask to replace it. What I thought was - anyway this is the first thing we bought for our new home, so no need to change it. Now my husband is no more, we don't have children and I am here in this place.

Now this lamp is the memory of our unbuilt house. Even for a single day I didn't light up the lamp. No... I am not going to light it up in the future too. What is the need of it? Let it be with me here as a memory of our unbuilt home and as a memory of my husband (...) I wanted to give the lamp to any temple, but not in the immediate future any more. Later only.

Here in this old age home nobody knows about it. Even my roommates or matron do not know. I kept the lamp in a cover and put it in an iron trunk box and placed it in the Almarah [closet] very safely. Sometimes, if I am alone in the room, I would take out the lamp from the Almarah for a while, and have a look at it. And very soon wrapped it up and placed it again in the Almarah (Older adult, Widow, 75 years old)"

Keeping Chickens

A link with past life

"I am a widow. I have one son and two daughters. I don't know where they are now. When I was young I struggled a lot to take care of these children. I lost my husband when these children were small kids.

Although I don't use egg or meat, I used to domesticate hens for my children. Here also I don't use egg or meat. But I don't know why I take care of these hens and cocks?

Every day in the morning I used to feed them with the leftovers of my breakfast. Then I release the cocks from the cage and keep the hens in the cage, until they give that day's egg. I keep the egg in the fridge. I don't know what will happen to the egg. Any way I don't use it, so why should I bother about it? Those who want may take it. In the evening I close the cage when all the hens and cocks are inside (Older adult, widow, 82 years old)."

Father Figure

Fictive kinship towards an elder older adult

"Here I am very close to that Appachan. He is about 90 years old. He needs somebody's help for his daily activities. He has no proper sense and memory. Even he doesn't know what is happening all-around. What to do?"

I lost my father when I was a kid.(...) He is like my father [laughs]. Often I feel he is very close to me like my father.(...) I will take care of him in all his needs. I have no problem, whether it's bathing or cleaning. I used to feed him. I will have my food only after his breakfast or lunch. (...) It's not only me. Everybody here consider me and him as son and father respectively [laughs].

Really, I never felt any hesitation. I am very happy to serve him. (...) If you ask: do you help others like this? My answer is: No, I can't. I don't know the reason {Older adult, widower, 72 years old}."

Paper Cuttings

Quest for knowledge

"I studied only up to the sixth standard. Though I wanted to study further I was compelled to stop my study to help my family, especially to take care of my nephew.

I am very fond of reading. I read stories, the Bible, religious books and newspapers. I read everything (...) You want to see one thing... Look at it. These are paper cuttings of general knowledge from newspapers.

(...) Once I was denied my schooling. Those days I cried a lot, but no avail. Now I am trying to compensate that loss, because here I have a lot of time.

I have a niece. Now she just passed her degree with 76 percentage marks. I bought a new watch for her. She doesn't know I have a new watch for her. (...) I would like to give these general knowledge paper cuttings to my niece, if she wants it (Older adult, Unmarried, 65 years old)."

Japamala

A medium to attain God's grace

"I like to live in Ashramam atmosphere (...). There are two Japamalas. One is from Kashi and gifted by my cousin . Another one is the most precious one for me. The black one with a big rudraksha at the end. (...) I got this Japamala from Valliyamkavu. Valliyamkavu amma (deity of the temple Valliyamkavu) is too powerful. I am a very devotee of Valliyamkavu amma.

*It's a kandaka shani * time for me.*

I do believe the Gods Ganapathi , Saraswati and Mahavishnu are part of this Japamala. That is important. What do we need more than these Gods' grace? (...) Every day I pray with this Japamala, especially when I am in stress (Older adult, Widow, 75 years old)."

**As per astrology, kandaka shani is one of the worst time periods in a person's life.*

Posters:

Ageing in Institutional settings (for-profit care homes)

Ageing in Institutional Settings

Kottayam, Kerala, India, 2015

Non-government Old Age Home

This institution is situated at the top of a hill. It's a three storied building and has Wi-Fi internet facility. This institution is meant for the older adults who belong to the more affluent sections of the society. Rooms are air-conditioned and have television and a telephone connection. Services are based on the payment the residents have agreed to pay. Both male and female older adults are accommodated. Each room door opens to a well maintained garden. This institute accommodates both able bodied and non-able bodied older adults. Able bodied older adults reside mainly in the ground floor. Non-able bodied older adults are taken cared by nursing assistants. Most of the residents have lived abroad in other countries before moving to this home. Managerial staff includes the head of the institute CEO/managing trustee, one manager for operations, one manager for residential relations and a receptionist. Service staffs are categorized into different sections such as cleaning section, laundry, gardening and kitchen. This institute provides in-house training for its staff on how to care for older adults.

Ageing in a Globalizing World

Playing cards and watching movies together feels good!

"Playing cards is one of the most enjoyable times here. We - five or six residents- don't want to miss the game. When possible we could play cards the whole morning and evening. It's very funny. We usually play 28.

We have to wear a kunukku [as a symbol of punishment] when we lose the game. Then the staff working in the kitchen will come out and take our photo [laughs]. Do you know how to play 28?

Sometimes we watch movies in the common room. Everybody has a separate TV in their rooms, but when we watch together it's a special feeling. There we can talk with each other. Feeling good (Older adult, Married, 77 years old)."

The Holy Bible

Memories of people who have left us

"It's not an ordinary Bible for me. More than the biblical or spiritual value, it's my love and affection towards my mother-in-law. I am not that much religious. I was a religious person before my marriage. My husband is an atheist. He worked a lot for a rational atheist group, but he gave me all the freedom to believe or not to believe in God.

Around 43 years back my mother-in-law presented me the Bible. She was very much worried about her son, my husband's attitude towards God and religion. She gave me the Bible the very next day after our marriage. Wherever we go, I take the Bible with us. We have been in North India for 14 years, in the US for 16 years and in our home in Kerala for 12 years. And now here in this place, I carried this Bible with me everywhere. Now it became a memory of my mother-in-law.

One more thing. I lost my first two sons when they were really young. I lost my first son when he was 9 months old. I am carrying his photo in this Bible. It's a Bible which can't be replaced with any other Bible. It's that much special to me (Older adult, Married, 73 years old)."

Yoshi

Love and affection towards a pet

"My Yoshi, I miss him a lot. I wanted to keep him with me here, but how is it possible? Before I moved to this place I was in Highrange. There I have a house and a few acres of estate. I have a servant to take care of all these things. Now Yoshi is with him.

It's not me, but my granddaughters, they are in the US and they named him Yoshi. They got this name from a Japanese game. Yoshi means saviour.

I feel so bad because I go there once or twice in two months.

He will die soon. Now he is twelve years old. When he was young, if I wasn't at home for one or two days, he used to get angry. He would not come to me even if when I reached home. After some time he would come to me and sit on my lap. Now he gets very old. Even though he is old he recognises me when he hears my car horn. He walks slowly towards me. I lift him up. Then I spend one or two days with my Yoshi. The two of us alone in my room. (...) Really, I miss my Yoshi a lot (Older adult, Widowed, 67 years old)."

Walking Stick

Token of love and memory

"I was working in Defence Ordnance Factory. There we have a system, at the time of retirement every staff member will get a walking stick and a torch. I lost my torch. Now this walking stick is remaining. In our Ordnance factory we have a carpentry section. This stick is made from that carpentry section.

Before I reached this place, I was in Dubai with my son and his family. Before I left for Dubai I gave this stick to one of my neighbours. Actually he asked me.

I thought: what would be the use of it for me in Dubai? I gave it to him. After a few months I came back to Kerala. After some days I started to think about my stick. I don't want to lose it... It's not about money. It's all about love and memory of the place where I worked and friends... My 35 years of service.

Finally I got it back (...). Is it wrong that I asked to return my walking stick? For him it's only an ordinary stick, but for me it's the memory of my 35 years of service (Older adult, Widower, 75 years old)."

Staff Welfare

An initiative by the older adults

"I was a president of a club in Hyderabad for about 40 years. I like to build relationships with people irrespective of their status. (...) Here I used to talk with the staff members. These are the people who are serving us. (...) Often we talk about their family and kids and their education. Sometimes some staff member brings their children here. We often play with them. Play means sit with them. Chat with them. Isn't it cute? [laughs] (...) Now I know seven languages. Here, with the help of a staff member, I am trying to learn the eighth language. It's Oriya [laughs]. She is working in the cleaning section. She is from Odisha.

Here we have a system that we celebrate our birthdays. We as the residents can decide how to celebrate it. Me and the other uncle have our birthday at the same day, so we decided not to celebrate our birthday in the usual way. Instead we contributed the amount to the staff welfare fund. (...) Here as per rule we are not supposed to give any tip or money or any kind of presents to the staff members directly, instead we can put the money into the welfare fund. There is a box for that purpose (Older adult, Married, 83 years old)."

In-depth Interview Guide for Older adults

Institutional Life, Place Attachment and Home-Making: Lived Experiences of Older Adults in Old Age Homes in Kerala, India

Consent

This interview is taken purely for research purposes. All information that you give us will be anonymized. During the interviews you have the right to stop the interview or not answer any question that you think is uncomfortable. For this interview we also would like to ask your permission to record it as this will reduce the time of the interview and we will be free to hear your experiences and ideas. Will you please give us your consent to interview and record it.

Background information

1. Please tell me something about yourself?
2. Can you explain about your life before making move to old age home/ retirement home?

Institutional life

3. How long have you been living in this retirement home?
4. What are the reasons to choose retirement home/ old age home?
5. How do you reach the decision to move to old age homes?
6. How is your present relationship with your family members?
7. How is your life in this retirement home?
8. How do you compare your life in retirement home with the life before moving here?
9. Can you briefly narrate to me your usual day in this home?
10. How do you see the care services which you are receiving from this institution?
11. What is your contribution towards the welfare of others or common welfare of retirement home?
12. What do you think about old age home/ retirement home before making your move to here?
13. What are the changes happened in your life after you start living in this retirement home?
14. Do you think this retirement home as your own home?
15. How do you see this place/ retirement home after making move to here?
16. How should be an old age home/ retirement home look like?

Place Attachment

17. What are places generally you feel attached to? Why?
18. How these places are connected to your life?
19. How these places are useful in this present day?
20. What is your relationship with these places?
21. Have the meaning of places or places change over time?
22. What are the places which you dislike?
23. What are places which you like to visit often? Why?
24. Which is the place you wanted to live your whole life? Why?

Home Making

25. Do you feel at home here in this institution?
26. What makes you feel at home here?
27. Can you tell me what are the rules and regulations that exist in this old age home?

- 28 What have been your memorable events or life experiences related with this old age home?
- 29 How is your relationship with fellow residents in this old age home?
- 30 How is your relationship with care givers?
- 31 How do you convert the place look more like home?

Possessions

- 32. What is there in your room that reminds you of previous home?
- 33 What are possessions you bring from home? (why these possessions?)
- 34. What is the role of these possessions in your life?
- 35. Can you speak about one or two possessions which you consider much valuable in your life?
- 36. What do you plan to do these possessions after your life? (give to whom? Why?)

Culture

- 37. In your opinion how should an older adult be looked after?
- 38. Who should do this?
- 39. How is it difference when you cared for your parents?

Well-being

- 40 What is the need of making this place as a home?
- 41 What are the activities you involve to feel comfortable?
- 42 What contributes to healthy living in this retirement home?
- 43 What are the moments that you feel insecure or discomfort?
- 44 What will you do when you feel insecure/discomfort

Closing questions

- 45 Numbers of old age homes (formal care institutions) are increasing day by day. What is your opinion about this situation?
- 46 What are your aspirations for future?
- 47 What are your recommendations for those who going to live in old age homes/ retirement home?

In-depth Interview Guide for Care taker

Institutional Life, Place Attachment and Home-Making: Lived Experiences of Older Adults in Old Age Homes in Kerala, India

Consent

This interview is taken purely for research purposes. All information that you give us will be anonymized. During the interviews you have the right to stop the interview or not answer any question that you think is uncomfortable. For this interview we also would like to ask your permission to record it as this will reduce the time of the interview and we will be free to hear your experiences and ideas. Will you please give us your consent to interview and record it.

1. Could you tell me about yourself? (personal background, years of services, experiences)
2. what kind of service would you do here? (physical, emotional, management, community level care, individual level care)
3. Can you please say more about staff working here (staff role, experiences in geriatric care)?
4. could you please say more about rules and regulations of this home? (rules, regulation, restriction, registrations, fee structure)
5. what are process for a new appointment here?
6. Could you please say more about day-to-day activities in this care home? (daily routines, religious practices, food, mobility of older adults, management)
7. Does this home get any government aid? (different aids and help from outside)
8. Can you please say more about your personal relationship with older adults living here (interpersonal relationship, relationship with family, gender and power relation)?
9. Could you please say more about different kind of celebration conducting in this home?
(religious celebration, tour programs, birthday celebration)
10. What you do when an older adults fall in ill? (general care, special care, hospitalization)
11. How do you maintain relationships with the inmates?
12. Can you please say about the registration process of this home?
13. Do you feel here as your own home? (why?)
14. What do you do to keep the inmates happy?
15. Do you conduct general meeting with older adults or (feedback, complaints, suggestion, recommendation from older adults, meetings with family members)
16. Can you say more about your future plan? (plan for improving older adults wellbeing, modification of home, plan for change in rules and regulation)

Informed Consent Form for Interviews and Visual Methods

Research Title: Institutional Life, Place Attachment and Home-Making: Lived Experiences of Older Adults in Old Age Homes in Kerala, India

Contact Researcher: Nikhil P.N., PhD Research Scholar, Population Research Centre, Faculty of Spatial Sciences, University of Groningen, The Netherlands

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Description: The purpose of this study is to understand the place attachment and home making behaviour of older adults in institutional care settings in Kerala, India. What are the places older adults feel attached to? How do they consider institutional care settings as their home? What is the extent of relation between older adults and care givers? What is the role of interpersonal relationship and cultural practices in institutional life? We would like to know what kind of norms, practices, values and possessions that you use to feel the institutional care setting as your home. In addition to the interviews we would also like to take pictures of places, things and possessions that you consider very important. During the whole study you can choose not to participate in any components or not answer questions which you feel uncomfortable.

All the information will be made anonymized and no identifying information will be retained. As per NWO rules we are required to hand over data to an archive. Any information that is sent to the archive will also be anonymized. You have the right to refuse the archiving of your interview or visual material.

If you have any comments or complaints about this research, you may contact the Principal investigator of this project Dr. Ajay Bailey (a.bailey@rug.nl).

Participant's Agreement:

I am completely aware of the project as explained to me by the researcher. I wish to voluntarily participate in this study. I can decide to withdraw for the study at any time without any consequences.

I agree to be interviewed and to share photographs with the researchers. I am also aware that the information that I provided will be anonymized. I agree that the information thus collected can be used for scientific publications and will not be commercially distributed. I hereby consent to participate in this project.

Participant's signature and name Date

Interviewer's signature

English Summary

Ageing in Care Homes: Place Attachment and Homemaking Practices of Older Adults in Kerala, India

This Ph.D. thesis explores the place attachment and home making practices of older adults living in different types of care homes in Kerala. Kerala has witnessed rapid demographic transition as a result now is the leading state with population ageing. A series of societal changes such as urbanization and industrialization have increased work force participation of all members of the household. This, coupled with the migration of children, results in the non-availability of family caregivers within the household. As a result of these demographic as well as societal changes, care home services for older adults have begun to receive considerable attention as an alternative for traditional informal care services.

When an older adult moves to a care home, they enter into a different care environment with new care relations and expectations. In these situations, the wellbeing of older adults in the care home is determined by how new environments positively benefit them. 'Feeling at home' in a care setting can have a positive effect on the wellbeing of older adults because it fosters sense of autonomy, sense of continuity, sense of safety, self-confidence, and social integration.

In India, care homes are generally perceived as places where older adults are deserted by their family members and older adults in care homes are perceived as mere care receivers. In this study we recognize and explore the performative roles of older adults to utilize and modify their care home environments to recreate home like atmosphere in a formal care setting and to establish sense of belonging, self-identity, daily rhythms, and continuity in life. So our overall objective of this qualitative research was to gain insight into the processes of place attachment and home-making practices of older adult living in different types of care homes in Kerala, India. In order to understand a wide range of place attachment and home-making process we focused on the following research questions.

1. What different pathways do older adults follow to institutional care homes and how are socio-economic backgrounds, culture, and gender reflected in the autonomy and decision-making processes in these pathways? (Chapter 3)
2. What motivates older adults to retain their previous homes while residing in for-profit retirement homes? How do older adults maintain previous homes? And how are these motivations linked to a sense of place attachment? (Chapter 4)
3. How do older adults engage with their cherished possessions and how do possessions help in the homemaking process and promote emotional wellbeing in care homes? (Chapter 5)
4. How do older adults (re)create home through domestic daily rhythms and caregiving practices in an institutional care home? (Chapter 6)

The conceptual model designed for this study is adapted from the tripartite model of place attachment developed by Scannell & Gifford (2010) combined with theories on cultural schemas or belief system, and home-making process. In addition, other theories such as theories on emotional geographies (RQ 3), daily rhythm and kinning (RQ 4) have been applied in the analysis and interpretation of data collected during qualitative fieldwork.

For this study, we selected three care homes from three different socio-economic backgrounds. (1) Non-profit care homes meant for poor and destitute older adults; (2) For-profit as well as religious care homes for older adults from the middle class; and (3) For-profit and secular care homes for older adults belonging to middle- and upper-middle income groups.

In order to simultaneously conduct the investigation, all the three care homes are selected from Kottayam District. Participants taking part in this study were recruited with the prior permission of all three care homes. For this study we have followed an qualitative approach and applied methods such as in-depth interviews; participant and non-participant observation; and photography to better understand a wide range of place attachment and home making practices in care homes. We also sought separate permission from older adults and caregivers. Each participant was informed about the research before their participation and their consent was recorded. Photographs were taken with prior permission of the retirement home and participants. To address the four research questions, in-depth interviews were chosen as the main method for data collection. In-depth interviews were conducted with thirty-seven (37) older adults (23 women and 14 men) and four (4) caretakers and administrators. The aim of the in-depth interviews was to explore individual experiences, perceptions and meanings of place attachment and homemaking practices of the older adults in care homes particularly in relation to cultural schemas; gender and power relations; and socio-economic backgrounds. Observation enabled us to systematically observe older adults' behavior, actions and interactions in their socio-cultural context and to obtain detailed descriptions of social settings and events. Observation also helped us to bring greater understanding and interpretation of cultural behavior in communal and personal spaces of care homes. The main aim of photography as a visual method in this study was to enrich the narratives around homemaking practices by examining a wide range of cherished possessions owned by the older adults (see chapter 5). Based on the photographs and participant quotations, the first results of this part of the study were developed into posters and these posters were exhibited at different occasions in India and the Netherlands (see appendices). All the interviews were transcribed into Malayalam (vernacular language of Kerala) and then translated to English for textual analysis. We used the software ATLAS. ti. 7 for data analysis.

Key findings

This section summarizes the key findings of the study. These findings are presented following the sequence of the chapters in the thesis and thereby also follow the order of the research question.

Chapter 3 investigated the different pathways of older adults living in different care homes in Kerala. Older adults' pathways towards care homes are not linear in nature but include different types of residences and serial changes in places of residence. Poverty, destituteness, abuse and negligence from family are the main reasons that motivate older adults to reside in a non-profit care homes. Government interventions, interpersonal relationships, and social ties played a large role in determining the quality of wellbeing of older adults living in non-profit care homes. Health issues, religious reasons, loneliness, the migration of children, unmarried

status, the wish for independent living space, and non-availability of caregivers at home are the main reasons we found that motivated older adults from better socio-economic backgrounds to select for-profit care homes. Decision-making process and pathways to care home are largely characterized by the socio-economic position, gender and power relations that exist in the family. This chapter identified three types of pathways for older adults: (1) Home to care home: (2) Home to different living arrangements and then finally reaching the care home: older adults living in non-profit care homes are likely to experience interim living arrangements (including homes, the homes of relatives and friends, and work places) before reaching the care home. These interim living arrangement includes rented homes, relatives and friends home and work places. (3) Home to various other care homes before reaching the current care home. Older adults living in for-profit care homes experienced this pathway characterized by multiple care homes as they possess better socio economic status and higher autonomy in decision making process.

Chapter 4 examines the motivation of older adults to retain home ownership. Our study found that older adults, living in for-profit care homes, showing a tendency to retain and maintain their homes. Older adults' motivation to retain and maintain their family homes are primarily due to fulfill their familial obligation which is shaped by the cultural meaning system. Older adults believe that it is their culturally-bounded and familial duty to retain and maintain the family home for their migrant children and grandchildren. Because these homes represent migrant children's family root. Fulfilling familial obligations is a goal shaped by the cultural meaning system which brings a sense of life-stage satisfaction and a sense of pride among older adults. Additionally, home and its neighborhoods are the places constantly linked with memories and emotions. Owning and retaining ownership of a home helps to promote the autonomy, control, continuity, self-expression, and personal identity of older adults. Older adults apply different strategies to maintain their homes and the possessions in their homes. Those strategies include: (1) renting out the home; (2) allowing a trusted person to reside in the home rent-free; (3) visiting often to take care of the house; (4) asking relatives or neighbors to take care of the home; (5) appointing separate staff to take care of the home. Older women are keener to occasionally visit their homes and often engaged in cleaning, gardening and farming activities.

Chapter 5 explores the roles of Cherished possessions in homemaking process in care homes. In this chapter we specifically focused on the possessions that older adults carry with them to care homes. Primarily we used the theories from emotional geography to understand the role of cherished possessions in homemaking process. Cherished possessions helped older adults to evoke memories and emotions, such as a sense of happiness, sense of co-presence, love, nostalgia, pride, hope, a sense of security, and a sense of connectedness with the past. We found that older adults carry three types of cherished possessions that are embodied with different roles and emotional qualities. They are (1) religious possessions which signify a sense of security in day-to-day life and helping older adults to modify their physical surroundings in care homes to create a sacred ambience. (2) Possessions embedded with memories of past life events, places, and people that elicit a sense of pride and a sense of continuity. Possessions, which linked to memories of family members and pets which elicit

sense of co-presence and domesticity. Older men show a tendency to cherish possessions associated with their occupation-related identities while women have personal possessions associated with their care roles. Management of non-profit care homes need to provide more freedom and private space for older adults to cherish their possession.

Chapter 6 specifically focus on a range of daily rhythm activities and care relations which help older adults living in non-profit care homes to (re)create home atmosphere in care home. We found that Homemaking practices of older adults in non-profit care homes are carried out through domestic activities, care giving roles, kinning, and cultural practices. Older adults engage, both individually as well as collectively in domestic activities. Collective practices include activities such as dining; praying; cooking; and farming. These collective practices help to build a sense of family togetherness among older adults. Most of the domestic activities are linked with their past and also associated with gender roles. The everyday performance of these domestic activities helps older adults to build a habitual routine in the new place which promotes a sense of domestic rhythm and a sense of continuity in the new setting. Opportunities to engage in cultural and religious practices help to create joyful and cherished moments in a new setting. This study also highlights the role of older adults as caregivers of fellow older adults specifically kinning. The everyday exchange of physical and emotional care increases the chances of forming kin relationships between older adults and to create a new social support system intrinsically within care home. Kinning relations help to reproduce missing familial ties in formal care setting.

Specifically, this study contributes to the integration of various theories (cultural schemas, theories of emotional geography, daily rhythm and kinning) to understand homemaking process in care home settings in Indian cultural context. These theories helped to identify and understand a wide range of performative activities of older adults to (re) create home in formal care settings.

Nederlandse samenvatting

Oud worden in verzorgingstehuizen: het creëren van plaatsverbondenheid en een thuisgevoel onder ouderen in Kerala, India

Dit PhD-proefschrift onderzoekt manieren om plaatsverbondenheid (*place attachment*) en een thuisgevoel (*homemaking practices*) te creëren door ouderen die in verschillende soorten verzorgingstehuizen in Kerala wonen. Kerala heeft een snelle demografische transitie doorgemaakt, waardoor het nu de staat is met het grootste aantal ouderen. Een aantal maatschappelijke veranderingen, zoals verstedelijking en industrialisering, hebben ervoor gezorgd dat alle gezinsleden meer zijn gaan werken. In combinatie met de migratie van kinderen heeft dit ertoe geleid dat er geen gezinsleden meer beschikbaar zijn om voor de ouderen binnen het huishouden te zorgen. Als gevolg van deze demografische en maatschappelijke veranderingen is er aanzienlijk meer belangstelling voor verzorgingstehuizen als alternatief voor traditionele informele zorg.

Wanneer ouderen naar een verzorgingstehuis verhuizen, komen ze terecht in een andere verzorgingsomgeving met nieuwe verzorgingsrelaties en -verwachtingen. In deze omstandigheden wordt het welzijn van ouderen in het verzorgingstehuis bepaald door de mate waarin deze nieuwe omgeving een positief effect op ze heeft. Een ‘thuisgevoel’ in een verzorgingsomgeving kan een positief effect hebben op het welzijn van ouderen, omdat het hen een gevoel van autonomie, continuïteit, veiligheid, zelfvertrouwen en sociale integratie geeft.

In India worden verzorgingstehuizen over het algemeen gezien als plekken waar ouderen door hun familieleden worden achtergelaten. Ouderen in verzorgingstehuizen worden dan ook slechts gezien als zorgontvangers. In dit onderzoek erkennen en onderzoeken we de performatieve rol van ouderen om hun omgeving in een verzorgingstehuis te gebruiken en aan te passen om een thuisgevoel te creëren binnen een formele verzorgingsomgeving, en zich zo thuis te voelen en een eigen identiteit, dagelijkse routines en continuïteit op te bouwen. Het algemene doel van dit kwalitatieve onderzoek was om inzicht te krijgen in de processen voor het creëren van plaatsverbondenheid en een thuisgevoel onder ouderen die in verschillende soorten verzorgingstehuizen in Kerala, India, wonen. Om een groot aantal verschillende processen voor het creëren van plaatsverbondenheid en een thuisgevoel te begrijpen, hebben we ons op de volgende onderzoeksvragen geconcentreerd.

1. Welke verschillende trajecten volgen ouderen op weg naar een verzorgingstehuis en welke invloed hebben hun sociaaleconomische achtergrond, cultuur en gender op de autonomie en besluitvormingsprocessen in dit traject? (Hoofdstuk 3)
2. Wat is de motivatie van ouderen om hun voormalige huis aan te houden, terwijl ze in een commercieel verzorgingstehuis wonen? Hoe houden ouderen dit voormalige huis aan? En hoe is deze motivatie gerelateerd aan een gevoel van plaatsverbondenheid? (Hoofdstuk 4)

3. Hoe gaan ouderen om met hun dierbare bezittingen en hoe helpen bezittingen bij het creëren van een thuisgevoel en bij het stimuleren van emotioneel welzijn in verzorgingstehuizen? (Hoofdstuk 5)
4. Hoe creëren/reproducen ouderen een thuis door middel van dagelijkse routines en verzorgingspraktijken in een verzorgingstehuis? (Hoofdstuk 6)

Het conceptuele model dat voor dit onderzoek is ontworpen, is een variant op het driedelige model van plaatsverbondenheid dat is ontwikkeld door Scannell & Gifford (2010), gecombineerd met theorieën over culturele schema's of geloofssystemen, en het proces van het creëren van een thuisgevoel. Daarnaast zijn andere theorieën, zoals theorieën over emotionele geografieën (RQ 3), dagelijkse routines en het opbouwen van hechte relaties (RQ 4) toegepast in de analyse en interpretatie van de gegevens die tijdens het kwalitatieve veldwerk zijn verzameld.

Voor dit onderzoek hebben we drie verzorgingstehuizen uitgekozen met drie verschillende sociaaleconomische achtergronden: (1) niet-commerciële verzorgingstehuizen bedoeld voor arme en behoeftige ouderen; (2) commerciële verzorgingstehuizen en religieuze verzorgingstehuizen voor ouderen uit de middenklasse; en (3) commerciële en seculiere verzorgingstehuizen voor ouderen uit de middenklasse en hogere middenklasse.

Om het onderzoek gelijktijdig te kunnen uitvoeren, is gekozen voor drie verzorgingstehuizen in het district Kottayam. De deelnemers aan dit onderzoek werden geselecteerd met voorafgaande toestemming van alle drie de verzorgingstehuizen. Voor dit onderzoek hebben we een kwalitatieve aanpak gekozen en methoden gebruikt zoals diepte-interviews, observatie van deelnemende en niet-deelnemende ouderen, en fotografie om het grote aantal verschillende manieren om plaatsverbondenheid en een thuisgevoel te creëren in verzorgingstehuizen te begrijpen. We hebben ook apart toestemming gevraagd aan ouderen en verzorgers. Alle deelnemers kregen vooraf informatie over het onderzoek en hun toestemming is vastgelegd. De foto's zijn genomen met voorafgaande toestemming van het verzorgingstehuis en de deelnemers. Om de vier onderzoeksvragen te kunnen beantwoorden, is gekozen voor diepte-interviews als belangrijkste methode om gegevens te verzamelen. Er werden diepte-interviews gehouden met zevenendertig (37) ouderen (23 vrouwen en 14 mannen) en vier (4) verzorgers en bestuurders. Het doel van de diepte-interviews was om individuele ervaringen, percepties en betekenissen van het creëren van plaatsverbondenheid en een thuisgevoel onder de ouderen in verzorgingstehuizen te onderzoeken, en dan vooral in relatie tot culturele schema's, gender- en machtsrelaties, en sociaaleconomische achtergronden. Door middel van observatie konden we het gedrag, de acties en de interacties van ouderen in hun sociaaleconomische context waarnemen en zo hun sociale omgeving en gebeurtenissen gedetailleerd beschrijven. Observatie hielp ons bovendien om het culturele gedrag in de gemeenschappelijke en privéruimtes van de verzorgingstehuizen te begrijpen en te interpreteren. Het belangrijkste doel van fotografie als visuele methode in dit onderzoek was om het narratief rond het creëren van een thuisgevoel te verrijken door een groot aantal verschillende dierbare bezittingen van ouderen te onderzoeken (zie hoofdstuk 5). Op basis van de foto's en citaten van de deelnemers zijn de eerste resultaten uit dit onderdeel van het onderzoek verwerkt tot posters. Deze posters zijn bij verschillende gelegenheden in India en

Nederland tentoongesteld (zie bijlagen). Alle interviews zijn in het Malayalam (de streektaal van Kerala) getranscribeerd en vervolgens naar het Engels vertaald voor tekstuele analyse. Voor de gegevensanalyse hebben we gebruikgemaakt van de software ATLAS.ti 7.

Belangrijkste bevindingen

In dit onderdeel worden de belangrijkste bevindingen van het onderzoek samengevat. Deze bevindingen worden gepresenteerd in de volgorde van de hoofdstukken van het proefschrift en daarmee ook de volgorde van de onderzoeksvragen.

Hoofdstuk 3 onderzoekt de verschillende trajecten van ouderen die in verschillende verzorgingstehuizen in Kerala wonen. De trajecten van ouderen naar verzorgingstehuizen zijn niet lineair, maar bestaan uit verschillende soorten verblijfplaatsen en opeenvolgende verhuizingen. Armoede, behoefte, misbruik en verwaarlozing door familie zijn de belangrijkste redenen waarom ouderen in niet-commerciële verzorgingstehuizen verblijven. Ingrijpen door de overheid, persoonlijke relaties en sociale banden speelden een belangrijke rol in het bepalen van de kwaliteit van welzijn van ouderen in niet-commerciële verzorgingstehuizen. Uit ons onderzoek bleek dat gezondheidsproblemen, religieuze redenen, eenzaamheid, migratie van kinderen, ongetrouwde status, behoefte aan eigen woonruimte en gebrek aan beschikbaarheid van verzorgers thuis de belangrijkste redenen waren voor ouderen uit betere sociaaleconomische achtergronden om voor een commercieel verzorgingstehuis te kiezen. Besluitvormingsprocessen en trajecten naar een verzorgingstehuis worden vooral bepaald door de sociaaleconomische positie, gender en machtsrelaties binnen een familie. Dit hoofdstuk identificeert drie verschillende trajecten voor ouderen: (1) van huis naar verzorgingstehuis; (2) van huis naar verschillende woonomstandigheden en uiteindelijk naar een verzorgingstehuis – ouderen in niet-commerciële verzorgingstehuizen brengen vaak tijd door in tussentijdse woonomstandigheden (bijvoorbeeld huurhuizen, huizen van familie en vrienden of de werkplek) voordat ze in een verzorgingstehuis terechtkomen; (3) van huis naar verschillende verzorgingstehuizen voordat ze het huidige verzorgingstehuis bereiken – dit traject met meerdere verzorgingstehuizen kwam voor onder ouderen in commerciële verzorgingstehuizen, omdat ze een hogere sociaaleconomische status en meer autonomie hebben om zelf beslissingen te nemen.

Hoofdstuk 4 onderzoekt de motivatie van ouderen om hun voormalige huis aan te houden. Uit ons onderzoek bleek dat ouderen in commerciële verzorgingstehuizen de neiging hadden om hun huis aan te houden. De motivatie van deze ouderen om hun huis aan te houden was vooral om aan familieverplichtingen te voldoen die voortkomen uit het culturele systeem. Ouderen vinden dat het hun culturele en familieplicht is om het familiehuis aan te houden voor hun gemigreerde kinderen en kleinkinderen omdat deze huizen de oorsprong vertegenwoordigen van de familie waartoe deze gemigreerde kinderen behoren. Het voldoen aan familieverplichtingen is een doel dat voortkomt uit het culturele systeem dat ouderen een gevoel van tevredenheid over de levensfase en een gevoel van trots geeft. Daarnaast zijn het huis en de omgeving de plekken die steeds weer worden gekoppeld aan herinneringen en emoties. Het aanhouden van een huis helpt ouderen om dit gevoel van autonomie, controle, continuïteit, zelfexpressie en persoonlijke identiteit in stand te houden. Ouderen gebruiken

verschillende strategieën om hun huizen en de bezittingen in hun huizen aan te houden, bijvoorbeeld: (1) het huis verhuren; (2) iemand die ze vertrouwen gratis in het huis laten wonen; (3) het huis vaak bezoeken om het te onderhouden; (4) familie of vrienden vragen om het huis te onderhouden; (5) personeel aannemen om het huis te onderhouden. Vrouwen willen over het algemeen vaker hun huizen bezoeken en houden zich daarbij bezig met schoonmaken, tuinieren en agrarische activiteiten.

Hoofdstuk 5 onderzoekt de rol van dierbare bezittingen bij het creëren van een thuisgevoel in verzorgingstehuizen. Dit hoofdstuk gaat specifiek over de bezittingen die ouderen meenemen naar het verzorgingstehuis. We hebben voornamelijk gebruikgemaakt van de theorieën van emotionele geografie om de rol van dierbare bezittingen bij het creëren van een thuisgevoel te begrijpen. Dierbare bezittingen helpen ouderen om herinneringen en emoties op te roepen, zoals een gevoel van geluk, aanwezigheid, liefde, nostalgie, trots, hoop, veiligheid en verbondenheid met het verleden. Uit het onderzoek bleek dat ouderen drie soorten dierbare bezittingen meenemen met verschillende rollen en emotionele kenmerken: (1) religieuze bezittingen die hen in het dagelijks leven een gevoel van veiligheid bieden en hen helpen een gewijde sfeer te creëren in hun fysieke omgeving in een verzorgingstehuis; (2) bezittingen die zijn gekoppeld aan herinneringen aan gebeurtenissen, plekken en mensen uit het verleden en een gevoel van trots en continuïteit oproepen; (3) bezittingen die zijn gekoppeld aan herinneringen aan familieleden en huisdieren die een gevoel van aanwezigheid en huiselijkheid oproepen. Mannen koesterden vaak bezittingen die gerelateerd waren aan hun professionele identiteit, terwijl vrouwen vaak bezittingen bewaarden die gerelateerd waren aan hun verzorgende rol.

Hoofdstuk 6 houdt zich specifiek bezig met verschillende dagelijkse routines en verzorgingsrelaties die ouderen in niet-commerciële verzorgingstehuizen helpen om de sfeer van thuis te creëren/reproduceren in het verzorgingstehuis. Uit het onderzoek bleek dat ouderen in niet-commerciële verzorgingstehuizen een thuisgevoel proberen te creëren door middel van huiselijke activiteiten, verzorgende rollen, het opbouwen van hechte relaties en culturele gebruiken. Ouderen houden zich, zowel individueel als gezamenlijk, bezig met huiselijke taken. Gezamenlijke activiteiten bestaan onder andere uit eten, bidden, koken en agrarische activiteiten. Deze gezamenlijke activiteiten helpen ouderen om een gemeenschappelijk familiegevoel op te bouwen. De meeste huiselijke taken hebben een link met het verleden en zijn ook gekoppeld aan genderrollen. Het dagelijks uitvoeren van deze huiselijke taken helpt ouderen een routine op te bouwen in hun nieuwe leefomgeving. Dit geeft hen een gevoel van huiselijke routine en een gevoel van continuïteit in hun nieuwe omgeving. Mogelijkheden om deel te nemen aan culturele en religieuze gebruiken helpen om gelukkige en dierbare momenten te creëren in de nieuwe omgeving. In dit onderzoek wordt ook aandacht besteed aan de rol van ouderen als verzorgers van andere ouderen, en specifiek het opbouwen van hechte relaties. De dagelijkse uitwisseling van fysieke en emotionele zorg vergroot de kans op het opbouwen van familierelaties tussen ouderen en het creëren van een nieuw sociaal ondersteuningssysteem dat inherent is aan een verzorgingstehuis. Hechte

relaties helpen om ontbrekende familierelaties in een formele verzorgingsomgeving te reproduceren.

Dit onderzoek draagt specifiek bij aan de integratie van verschillende theorieën (culturele schema's, theorieën van emotionele geografie, dagelijkse routines en het opbouwen van hechte relaties) om het creëren van een thuisgevoel in verzorgingstehuizen binnen een Indiase culturele context te begrijpen. Deze theorieën hebben geholpen bij het identificeren en begrijpen van een groot aantal verschillende performatieve activiteiten die ouderen gebruiken om een thuis te creëren/reproduceren in formele zorgomgevingen.

Oud worden in verzorgingstehuizen: het creëren van plaatsverbondenheid en een thuisgevoel onder ouderen in Kerala, India

India ondergaat momenteel een demografische transitie en Kerala is inmiddels uitgegroeid tot de staat met het grootste aantal ouderen. Dit doctoraal onderzoek bekijkt de link tussen het proces om een thuisgevoel te creëren en het welzijn onder ouderen in verzorgingstehuizen. In tegenstelling tot het algemene beeld in de Indiase maatschappij dat verzorgingstehuizen een plek zijn voor armen, laat dit onderzoek zien dat verzorgingstehuizen actieve plekken zijn waar ouderen een belangrijke rol spelen in het aanpassen van hun omgeving om zo een thuisgevoel te creëren/reproduceren. Dit onderzoek maakt gebruik van theorieën van culturele schema's, emotionele geografie, dagelijkse routines en het opbouwen van hechte relaties om een groot aantal geleefde ervaringen te onderzoeken. We hebben het onderzoek uitgevoerd in drie verzorgingstehuizen die tot verschillende sociaaleconomische klassen behoren. We hebben methoden gebruikt zoals diepte-interviews, observaties van deelnemende en niet-deelnemende ouderen, en fotografie om de performatieve rol van ouderen bij het creëren van een thuisgevoel beter te begrijpen.

Uit dit onderzoek blijkt dat het traject naar een verzorgingstehuis niet lineair is, maar kan bestaan uit meerdere verblijfplaatsen, en dat de besluitvorming wordt bepaald door de sociaaleconomische status, familiebanden en het sociale netwerk. Dierbare bezittingen die worden meegenomen uit het eigen huis en die zijn gekoppeld aan meerdere herinneringen en emoties, helpen ouderen om een gevoel van geluk, aanwezigheid en identiteit te creëren. Huiselijke activiteiten, dagelijkse routines en religieuze gebruiken helpen om in de nieuwe omgeving een ritme op te bouwen. Deelnemen aan zorgrelaties, zoals het opbouwen van hechte relaties, helpen ouderen om ontbrekende familiebanden te reproduceren in een formele omgeving.

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