

Perspectives on Activity and Aging in the Developing World: Physical Activity and Older Persons in India

(Editor's Note: Although recent years have witnessed a tremendous expansion of interest in issues pertaining to physical activity and aging, the vast majority of published work in international academic publications has focused on the physical activity and aging dynamic from the sociocultural perspective of the developed or industrialized world. Remarkably little is known about the role of physical activity in the lives of seniors living in the nonindustrialized world. In this Guest Editorial, Professor Vinod Kumar, Former Chief of Geriatrics at the All India Institute of Medical Sciences, shares his thoughts about the role of physical activity for older persons living in India, the world's second most populous nation).

Indian society is characterized by marked cultural, socioeconomic, religious, and linguistic diversity and enjoys the reputation of giving respect and veneration to its oldest members. Of late, however, traditional family care for older persons is facing some erosion due to a number of factors, including unprecedented population aging, significant economic constraints, and a trend toward the modernization of society. Although morbidities that accompany aging, such as Alzheimer's disease, physical frailty, incontinence, and severe depression, have not reached the proportions seen in industrialized nations, many degenerative, infectious, and nutritional disorders are commonly encountered among older persons in India. While only 5% of older adults are physically immobile, serious socioeconomic marginalization is very common. Although awareness among older persons of the importance of self-care health practices has increased in recent years, public education concerning health and lifestyles is often inadequate.

Recently, a number of national and international scientific and medical organizations have turned their attention to the importance of physically active lifestyles in preventing premature morbidity and mortality in old age. For example, the World Health Organization recently issued "The Heidelberg Guidelines for Promoting Physical Activity Among Older Persons" (WHO, 1997, *JAPA*, Vol. 5, pp. 2-8). These guidelines conclude that regular participation in physical activity is associated with significant physiological, psychological, and social benefits for most older persons. It is important to consider the role that physical activity plays within the sociocultural context of a nation as diverse as India.

Older persons in India often undertake regular physical activity in the form of exercise, work, and, to some extent, recreation. However, the concept of physical activity as a form of recreation is relatively unknown in India. Organized sporting activities for seniors are rare, especially for the oldest old, who often are handicapped and restricted to their homes. The same is true of the poor and destitute old, who have few opportunities to participate in recreational physical activities. On the other hand, it is possible to identify a definite pattern of physical activity among fit and healthy older persons. Many seniors engage in physical activities as a means of social interaction, deriving significant happiness and relaxation from such activities.

In India, exercise for older persons is usually practiced in the form of walking and sometimes occurs as a part of a religious or spiritual activity. Swimming and gymnasium-based exercise employing modern equipment are extremely rare among older persons. There are almost no formal exercise classes designed exclusively for older persons. However, it is not uncommon for many older persons to rise early for a morning walk, which can include ordinary walking, brisk walking, or light calisthenics and other muscular exercise.

Almost all physical activity takes place outdoors and frequently occurs in a group setting. One common arena for physical activity is spiritual or religious assemblies, which are held in open spaces or within places of worship. Listening to spiritual discourses and divine songs at these congregations often provides seniors with a source of immense satisfaction. Chanting mantras (hymns), playing musical instruments, and practicing meditation frequently go hand-in-hand with physical activity. Many older persons practice yogic postures and other stretching exercises, which extend the muscles and joints and also massage the glands and other parts of body without increasing the pulse rate.

Work is a major component of physical activity undertaken by older persons in India. Twice as many older persons in Southeast Asian countries work for a living than in developed countries, where retirement is more common. For many older Indians, work is associated with significant physical exertion, including walking, manual work, and often cycling a considerable distance to and from work. Older persons from the unorganized sector of the economy account for almost 85% of the total geriatric population in India. These persons have no opportunities for retirement and continue to work out of sheer financial necessity for as long as possible. Casual wage-earning through agriculture, small-time shopkeeping, vegetable and fruit selling, small-scale industries (e.g., match box factories), religious preaching, and management of places of worship are some common examples of work undertaken by older persons. While some older women pursue some of the above vocations, the vast majority are engaged in family care and household activities. More research is needed to examine the similarities and differences between the benefits accrued from work-related physical activity versus leisure-time physical activity among older persons throughout the world.

In summary, physical activities are an integral component of everyday life for many older persons in India. While Indian seniors are less likely to participate in organized sports and structured recreational activity than their counterparts in the developed world, they are more likely to be involved in physical activity at work and in many other aspects of their everyday lives. There is considerable diversity in the specific type of activities engaged in by older persons, and the cultural contexts in which these activities take place vary considerably. However, there is a growing appreciation for the importance of healthful lifestyles and preventive medicine. Researchers, clinicians, and policy makers are beginning to appreciate the importance of lifestyle in preserving health and effective functioning in old age. Indian professionals look forward to participating actively in the international dialogue on the role of physical activity in healthful and successful aging.

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