

Elderly Care in Indian Knowledge Systems and Traditional Knowledge Systems

Pramod Kumar Shukla

<https://doi.org/10.61410/had.v21i3.317>

Abstract

Elderly care has been a central concern in both Indian Knowledge Systems (IKS) and Traditional Knowledge Systems (TKS), which emphasize holistic well-being, intergenerational responsibility, and community-based living. Rooted in philosophical, spiritual, and ethical frameworks, these systems perceive the elderly not merely as dependents but as carriers of wisdom, cultural continuity, and moral guidance. Ancient texts such as the Vedas, Upanishads, and Dharmashastras highlight seva (service), shraddha (respect), and guru-shishya parampara (teacher-disciple tradition) as integral to elder care, while Ayurveda prescribes lifestyle practices and therapies to ensure healthy aging. Traditional community structures like the joint family system, panchayat networks, and indigenous healing practices further demonstrate sustainable models of care that balance material support with emotional and spiritual well-being. In the contemporary context of rapid urbanization, nuclear families, and globalized lifestyles, these indigenous frameworks offer valuable insights for developing integrative models of elderly care that combine medical, psychological, and socio-cultural dimensions. Revitalizing these knowledge systems through policy, research, and social practice can help create inclusive and compassionate frameworks of care for the aging population, ensuring dignity, respect, and intergenerational harmony.

Introduction

Elderly care has been a central concern of Indian society since ancient times. Unlike modern approaches that often institutionalize the elderly in old-age homes, the Indian Knowledge System (IKS) emphasizes family-based, community-oriented, and holistic care rooted in dharma (duty), seva (service), and samskara (values). Traditional knowledge systems (TKS), deeply embedded in Ayurveda, Yoga, and social institutions like the joint family, provide sustainable frameworks for addressing the physical, mental, and spiritual needs of the elderly. This article examines the.

Member of Managing Committee, Indian Sociological Society, New Delhi.
Professor (Sociology), Dept. of Applied Science and Humanities,
KIPM College of Engineering and Technology, GIDA, Gorakhpur, UP

concept of elderly care within IKS and TKS, highlighting philosophical foundations, medical traditions, and socio-cultural practices.

Elderly Care in Indian Knowledge System

1. Philosophical Foundations

Varnashrama Dharma: The four stages of life (Brahmacharya, Grihastha, Vanaprastha, Sannyasa) assign a dignified role to old age. The Vanaprastha and Sannyasa ashramas particularly emphasize detachment, spiritual growth, and respect for the aged.

Upanishadic and Dharmashastra Literature: Texts like Manusmriti and Yajnavalkya Smriti stress filial duty (pitṛ-rin) and the responsibility of children towards aging parents.

Bhakti Traditions: Saints and poets often highlighted reverence to elders as equivalent to worship of God (matṛ devo bhava, pitṛ devo bhava – Taittiriya Upanishad).

2. Ayurveda and Geriatric Care (Jara Chikitsa)

Ayurveda, one of the oldest medical systems, recognizes Rasayana Tantra, which focuses on rejuvenation and longevity.

Charaka Samhita describes measures for Jara Chikitsa (geriatrics), emphasizing diet, herbal therapies, meditation, and lifestyle adjustments for healthy aging.

Practices like Panchakarma, use of herbs (Ashwagandha, Amalaki), and seasonal regimens support immunity, cognition, and vitality in old age.

3. Yoga and Mental Health

Yoga and meditation are prescribed for emotional stability, memory retention, and stress relief in the elderly.

Pranayama and Dhyana reduce anxiety, enhance concentration, and provide spiritual peace.

Elderly Care in Traditional Knowledge Systems

1. Family and Community Systems

The joint family system ensured intergenerational support, where elders were custodians of wisdom, traditions, and decision-making.

Elders were engaged in storytelling, rituals, and conflict resolution, which maintained their social dignity and relevance.

2. Traditional Healing Practices

Folk medicine, local dietary practices, and community-based care (use of oils, massages, traditional diets like kheer and ghee for strength) were integral to elderly well-being.

Indigenous knowledge of seasonal foods, fasting, and rituals promoted health sustainability.

3. Rituals and Cultural Practices

Festivals like Pitru Paksha and rituals of ancestor worship symbolize reverence for elders, both living and deceased.

Daily practices of touching elders' feet (pranām) reinforced their position of respect.

Contemporary Relevance

In modern India, urbanization and nuclear families have led to the erosion of traditional systems of elderly care.

Elderly care in contemporary society is at a crossroads, shaped by rapid urbanization, nuclear family structures, migration, and technological change. Against this backdrop, the Indian Knowledge Systems (IKS) and Traditional Knowledge Systems (TKS) provide sustainable pathways for addressing the challenges of aging. These systems emphasize holistic well-being, where health, dignity, respect, and social inclusion of elders are central to community life.

From the philosophical perspective, the Ashrama Dharma outlined in ancient texts recognizes the special role of elders in the Vanaprastha and Sannyasa stages, where their wisdom, detachment, and guidance are seen as crucial for family and societal balance. This framework is highly relevant today, as it promotes intergenerational responsibility and respect, countering the growing alienation of the elderly.

From the healthcare perspective, Ayurveda, Siddha, and Yoga traditions highlight preventive care, healthy aging, and therapies like Rasayana for longevity and vitality. These practices can be integrated with modern geriatric care systems to create a hybrid model of healthcare, reducing over-dependence on costly medical interventions.

From the socio-cultural perspective, oral traditions, storytelling, and ritual participation ensured that elders remained cultural bearers and transmitters of knowledge. In modern society, these practices can be revitalized through community programs, senior clubs, and intergenerational learning initiatives, helping to combat loneliness and promote cultural continuity.

From the policy and economic perspective, ancient community support systems like panchayats, temples, and local guilds played an important role in safeguarding elders. Reconstructing such collective responsibility in today's context—through public-private partnerships, community homes, and cooperative networks—can provide both material security and emotional belonging.

Thus, the way forward is not merely to preserve elderly care as a welfare activity but to reimagine it as a cultural duty rooted in Indian traditions, supported by modern structures. A sustainable approach will require (i) reviving traditional values of respect and care, (ii) integrating indigenous health systems with modern healthcare, (iii) creating community-based platforms for active aging, and (iv) institutionalizing policies that honor elders as repositories of wisdom rather than burdens.

Finally we can say that, the fusion of IKS and TKS with contemporary innovations offers a comprehensive model for elderly care that is ethical, sustainable, and culturally resonant—ensuring that aging in India is not only about survival, but also about living with dignity, respect, and purpose.

References

1. Sharma, P.V. (1981). Charaka Samhita. Chaukhamba Orientalia, Varanasi.
2. Susruta, K. (1999). Sushruta Samhita. Motilal Banarsidass, Delhi.
3. Radhakrishnan, S. (1953). The Principal Upanishads. HarperCollins, New Delhi.
4. Manu. Manusmriti. Translated by G. Buhler, Sacred Books of the East.
5. UNESCO. (2017). Traditional Knowledge Systems in India.
6. Singh, R. B. (2012). "Elderly Care in Indian Cultural Context." Indian Journal of Gerontology, 26(2), 187–200.