

From Joint Families to Nuclear Households: the Changing Landscape of ‘Intergenerational Care’ in India

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ABSTRACT

The Indian family has historically functioned as the primary site of intergenerational care, sustaining emotional well-being, economic security, socialization, and caregiving across generations through the institution of the joint family. However, processes of globalization, urbanization, educational mobility, demographic transition, and changing gender relations have profoundly altered traditional family arrangements, resulting in the growing predominance of nuclear and geographically dispersed households. While existing scholarship has extensively documented the structural transformation of Indian families, relatively little attention has been devoted to theorizing how these changes have reconfigured the organization, distribution, and meaning of intergenerational care. Addressing this gap, the present paper conceptualizes contemporary India as undergoing a significant “care transition”, wherein collective and co-residential forms of caregiving are increasingly being replaced by negotiated, individualized, and institutionally mediated arrangements. Drawing upon the theoretical perspectives of Talcott Parsons, Anthony Giddens, Carol Gilligan, and Nancy Chodorow, the study examines the ways in which family modernization has reshaped responsibilities toward children, older adults, and dependent family members. It argues that the transformation of family structures should not be understood as the decline of familial solidarity but rather as the reorganization of care within shifting socio-economic and cultural contexts. The emergence of dual-income households, increased female workforce participation, migration, and professional care services has expanded opportunities for autonomy and individual choice while simultaneously generating new challenges related to elder isolation, caregiving deficits, emotional fragmentation, and the persistent feminization of unpaid care work. By repositioning intergenerational care at the centre of debates on family change, the paper contributes to contemporary Home Science scholarship by demonstrating that the future of family well-being in India depends not on the preservation of traditional family forms but on the development of adaptive and sustainable caregiving frameworks capable of responding to the demands of an increasingly globalized and aging society.

Key Words : Intergenerational Care, Care Transition, Family Transformation, Joint Family, Nuclear Family, Ethics of Care, Aging and Eldercare, Unpaid Care Work, Family Well-being, Contemporary India

INTRODUCTION

Contemporary debates on family well-being, social sustainability, and human development increasingly converge around a fundamental question: who provides care in societies undergoing rapid social transformation? Across the world, demographic ageing, urbanization, labour mobility, and changing gender relations have

challenged traditional systems of caregiving, compelling families to renegotiate responsibilities that were once embedded within stable kinship structures. In this context, intergenerational care has emerged as a critical area of scholarly inquiry, not merely as a private family concern but as a broader social institution that shapes emotional well-being, social cohesion, and quality of life across generations. The capacity of families to provide care for

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children, older adults, and dependent members has therefore become a key indicator of social resilience in contemporary societies.

The Indian family has historically been distinguished by the prevalence of the joint family system, a kinship arrangement characterized by co-residence, shared resources, collective decision-making, and reciprocal caregiving among multiple generations. Beyond its residential form, the joint family functioned as a deeply embedded care institution that distributed responsibilities across family members and ensured continuity of support throughout the life course. Childcare, eldercare, emotional assistance, economic security, and the transmission of cultural values were largely sustained through interdependent familial networks. Such arrangements enabled care to be understood not as an individual obligation but as a collective moral responsibility grounded in kinship, reciprocity, and shared belonging.

However, the socio-economic transformations accompanying globalization have profoundly altered the organization of family life in India. Increased educational attainment, occupational mobility, urban migration, declining fertility, women's growing participation in paid employment, and the expansion of individual aspirations have contributed to the gradual proliferation of nuclear and geographically dispersed households. While these developments have enhanced personal autonomy, economic opportunities, and freedom of choice, they have simultaneously raised important questions regarding the sustainability of traditional caregiving arrangements. The transformation of family structures has not diminished the need for care; rather, it has reconfigured the ways in which care is organized, negotiated, and experienced within contemporary households.

Existing scholarship has extensively documented the transition from joint to nuclear family structures, often interpreting this shift through the frameworks of modernization, urbanization, and changing social values. Yet much of this literature remains primarily concerned with structural change, paying comparatively less attention to the implications of family transformation for intergenerational caregiving practices. Consequently, a significant gap persists in understanding how evolving family arrangements reshape obligations toward children, older adults, and dependent family members. At a time when India is experiencing both rapid demographic ageing and increasing household nuclearization, examining the future of intergenerational care has become an urgent

academic and social imperative.

Addressing this gap, the present paper advances the concept of a "care transition" to explain the ongoing reconfiguration of intergenerational support within contemporary Indian families. Drawing upon the theoretical perspectives of Talcott Parsons, Anthony Giddens, Carol Gilligan, and Nancy Chodorow, the study argues that family transformation should not be understood simply as the decline of traditional familial structures, but rather as the reorganization of care under conditions of late modernity. The paper contends that contemporary India is witnessing a shift from collective and co-residential forms of caregiving toward increasingly negotiated, individualized, and institutionally mediated arrangements of support. By repositioning intergenerational care at the centre of debates on family change, this study contributes to Home Science scholarship by offering a critical framework for understanding how families adapt to the competing demands of autonomy, mobility, caregiving responsibility, and social sustainability in an increasingly globalized society.

Literature Review:

The transformation of family structures in India has been a central concern within sociological and Home Science scholarship, particularly in relation to the gradual shift from joint family systems to increasingly nuclear and individualized households. Early studies by Desai (1964) and Shah (1998) highlighted the joint family as a significant institution of economic cooperation, socialization, and intergenerational support, while simultaneously challenging the assumption that it represented a fixed or universally dominant family form. Their work demonstrated that Indian families have historically adapted to changing social and economic circumstances rather than existing as static structures.

The relationship between modernization and family change has been extensively examined within family studies. Goode (1963) argued that industrialization and urbanization encourage the emergence of nuclear families because smaller households are more compatible with labour mobility and occupational specialization. Similar observations have informed studies of contemporary India, where globalization, migration, educational expansion, and economic liberalization have contributed to the growing prevalence of nuclear households. However, scholars such as Uberoi (2004)

caution against interpreting this transition as a straightforward movement from tradition to modernity, arguing that familial obligations and kinship ties frequently persist despite changing residential arrangements.

Recent scholarship has emphasized the coexistence of continuity and change within contemporary Indian families. Rather than disappearing, kinship networks are often reorganized through financial support, emotional exchanges, and digital communication, allowing family relationships to extend beyond co-residential living arrangements. This perspective suggests that family transformation involves a reconfiguration of relational practices rather than a complete erosion of intergenerational connections.

Within Home Science and family studies, increasing attention has been directed toward caregiving and ageing. Research indicates that demographic ageing, declining fertility, and household nuclearization have generated new concerns regarding elder support, emotional well-being, and long-term care provision (Lamb 2009; Vaidyanathan 2007). At the same time, feminist scholars such as Chodorow (1978) and Gilligan (1982) have demonstrated that caregiving remains deeply gendered, with women continuing to shoulder a disproportionate share of unpaid domestic and emotional labour despite increased participation in education and paid employment. Consequently, the transition toward nuclear households has often concentrated caregiving responsibilities within smaller family units, creating new pressures for working families.

Despite substantial scholarship on family transformation and caregiving, these themes have frequently been examined as separate areas of inquiry. Existing studies have either focused on structural changes in family organization or on caregiving challenges associated with ageing and social change. Comparatively limited attention has been devoted to understanding how evolving family structures reshape the organization and distribution of intergenerational care. Addressing this gap, the present study conceptualizes contemporary India as undergoing a “care transition,” in which collective and co-residential forms of caregiving are increasingly replaced by negotiated, individualized, and institutionally mediated arrangements of support.

Theoretical Framework:

The transformation of intergenerational care in contemporary India cannot be understood solely through

changing residential arrangements or demographic shifts. Rather, it must be situated within broader debates concerning modernity, social reproduction, relationality, and the reconfiguration of obligations under conditions of globalization. This study conceptualizes family transformation not merely as a structural transition from joint to nuclear households but as a deeper reorganization of the moral, social, and gendered foundations upon which care is produced and sustained. To examine this process, the paper draws upon the complementary insights of Talcott Parsons, Anthony Giddens, Carol Gilligan, and Nancy Chodorow, whose works collectively illuminate the intersections between modernization, individualization, caregiving, and social continuity.

Parsons' theory of structural functionalism provides an important starting point for understanding the relationship between social change and family organization. Writing within the context of industrial modernity, Parsons (1955) argued that the transition from extended kinship systems to the isolated nuclear family represented a process of functional adaptation. As societies became increasingly industrialized, economically specialized, and geographically mobile, the family underwent a corresponding transformation in order to accommodate new social and economic realities. While Parsons interpreted this shift as a necessary adjustment to modernity, his framework also raises a critical question that remains highly relevant in contemporary contexts: what becomes of those functions historically embedded within extended kinship networks when the institutional foundations supporting them are reconfigured? In the Indian context, this question is particularly significant because the joint family has historically operated not only as a domestic unit but also as a primary institution of intergenerational care.

The limitations of structural explanations become evident when examining contemporary family life through the lens of late modernity. Giddens (1992) argues that modern social relations are increasingly characterized by reflexivity, individualization, and the continuous negotiation of social roles. Traditional obligations derived from age, gender, and kinship lose their taken-for-granted authority, giving rise to relationships sustained through mutual choice rather than inherited duty. This perspective shifts analytical attention from family structure to family practice, suggesting that intergenerational support is no longer guaranteed by co-residence or customary obligation but is increasingly dependent upon ongoing

negotiation between autonomous individuals. Care, therefore, emerges as a reflexive social practice continually reconstructed within changing relational contexts.

Yet neither structural adaptation nor reflexive individualization adequately explains why care continues to occupy a central position within family life despite profound social transformation. For this reason, the ethics of care tradition offers an essential corrective to theories that privilege autonomy over interdependence. Gilligan (1982) reconceptualizes care as a moral orientation grounded in relational responsibility and human interconnectedness. From this perspective, caregiving is not merely a private domestic activity but a foundational social practice through which individuals and communities sustain one another across generations. The significance of care lies precisely in its capacity to mediate the tensions between individual aspirations and collective obligations that increasingly characterize contemporary family life.

Chodorow's (1978) theory of social reproduction further extends this analysis by foregrounding the gendered organization of care. Her work demonstrates that caregiving responsibilities are reproduced through deeply embedded social and cultural processes that position women as primary custodians of emotional and domestic labour. Consequently, family transformation does not necessarily diminish the need for care; rather, it reshapes the conditions under which care is performed and redistributed. The persistence of gendered caregiving expectations within dual-income and nuclear households reveals the enduring influence of social reproduction even amid processes of modernization and individualization.

Taken together, these theoretical perspectives enable the conceptualization of contemporary India as undergoing a profound care transition. This transition does not signify the disappearance of familial responsibility but the restructuring of the institutional, relational, and gendered mechanisms through which care is organized. Intergenerational support increasingly moves beyond the boundaries of co-residential kinship to encompass negotiated obligations, emotional reciprocity, market-mediated services, and new forms of social dependency. The concept of care transition thus provides a framework for understanding how family transformation simultaneously generates opportunities for autonomy and new vulnerabilities in an increasingly globalized, mobile, and ageing society.

Discussion:

The transformation of family structures in contemporary India represents more than a demographic or residential shift; it signals a fundamental reconfiguration of the social organization of care. Much of the existing discourse surrounding family change has focused on the apparent decline of the joint family and the rise of nuclear households. Such interpretations, however, risk reducing family transformation to questions of household composition while overlooking the deeper processes through which care, dependency, and intergenerational responsibility are being renegotiated. The present study contends that the most significant consequence of family transformation lies not in the disappearance of traditional family forms but in the restructuring of the caregiving arrangements that have historically sustained familial and social continuity.

The joint family traditionally functioned as a critical institution of social reproduction, ensuring that caregiving responsibilities were collectively distributed across generations. Within this framework, care was embedded within everyday familial practices and sustained through reciprocal obligations rather than explicit negotiation. Children, adults, and older family members occupied interconnected positions within a system of mutual dependence that reinforced both social cohesion and intergenerational solidarity. The significance of the joint family, therefore, extended beyond co-residence; it resided in its capacity to institutionalize care as a shared social responsibility. In this sense, the family operated as an informal welfare structure, compensating for the limited presence of formal caregiving institutions within Indian society.

Processes associated with late modernity have significantly altered these arrangements. Economic liberalization, geographical mobility, educational expansion, and changing aspirations have increased opportunities for individual autonomy while simultaneously weakening the structural conditions that facilitated collective caregiving. As family relationships become increasingly organized around personal choice and negotiated obligations, caregiving is no longer guaranteed through kinship position alone. The movement from inherited responsibility to negotiated responsibility represents one of the defining features of contemporary family life. Intergenerational support continues to exist, yet it increasingly depends upon individual capacity, emotional commitment, and material resources rather than unquestioned familial duty.

This transformation reflects a broader tension between autonomy and interdependence. Modern social institutions encourage mobility, self-realization, and economic independence, while caregiving remains inherently relational and dependent upon sustained social commitments. Consequently, contemporary families are required to reconcile competing demands that often pull them in opposite directions. Adult children may remain emotionally committed to ageing parents while being geographically separated by employment opportunities. Similarly, dual-income households may embrace ideals of gender equality while continuing to rely upon unequal distributions of unpaid care work. These contradictions reveal that modernization does not eliminate dependency; rather, it reorganizes the contexts within which dependency is experienced and managed.

The emergence of what may be conceptualized as a care transition further illustrates this process. As traditional mechanisms of intergenerational support become less capable of meeting contemporary caregiving demands, responsibility is increasingly redistributed across families, markets, and institutions. Professional caregiving services, assisted living facilities, domestic workers, and digitally mediated forms of communication have become important components of the contemporary care landscape. Such developments suggest that care is no longer located exclusively within kinship structures but is progressively dispersed across multiple social actors. Nevertheless, the persistence of emotional expectations surrounding filial responsibility indicates that cultural norms of intergenerational obligation continue to exert considerable influence, even as the practical delivery of care undergoes transformation.

At the same time, the gendered dimensions of care remain remarkably resilient. Despite significant advances in women's education, employment, and public participation, caregiving responsibilities continue to be disproportionately feminized. Family transformation has altered where and how care is performed, but it has not fundamentally resolved questions of unequal caregiving labour. The persistence of this imbalance highlights the extent to which social reproduction remains dependent upon invisible and undervalued forms of care work. Consequently, any analysis of family transformation that neglects the gendered organization of care risks overlooking one of the most significant continuities within contemporary social change.

The concept of care transition therefore provides a

more nuanced framework for understanding family transformation in India than narratives of decline or modernization alone. Rather than signalling the erosion of familial solidarity, contemporary family change reflects the emergence of new configurations of responsibility, dependency, and support. The future of intergenerational care will depend upon the capacity of families, communities, and social institutions to adapt to changing demographic and socio-economic realities while preserving the relational foundations upon which caregiving ultimately depends. In this regard, the transformation of family structures should be understood not as the disappearance of care, but as its ongoing reorganization within the conditions of late modernity.

Conclusion:

The transformation of family structures in contemporary India has often been interpreted through the visible decline of the joint family and the growing prevalence of nuclear households. Such interpretations, however, risk reducing family change to a question of residential arrangements while obscuring the deeper reconfiguration of caregiving relationships that underpins contemporary social life. This paper has argued that the most consequential dimension of family transformation lies in the restructuring of intergenerational care—the mechanisms through which emotional support, dependency, reciprocity, and responsibility are organized across generations.

Drawing upon the theoretical insights of Parsons, Giddens, Gilligan, and Chodorow, the study conceptualized contemporary India as undergoing a significant care transition, characterized by the gradual movement from collective and kinship-based systems of support toward increasingly negotiated, individualized, and institutionally mediated forms of caregiving. This transition reflects broader transformations associated with late modernity, where traditional obligations coexist with expanding aspirations for autonomy, mobility, and self-realization. Rather than signalling the disappearance of familial solidarity, family transformation reveals the adaptive capacity of social institutions to reorganize care in response to changing demographic, economic, and cultural conditions.

At the same time, the findings highlight important tensions within this transition. The persistence of gendered caregiving responsibilities, the growing demands of an ageing population, and the increasing reliance on market-

based care arrangements raise critical questions regarding the sustainability and equity of contemporary support systems. As caregiving responsibilities become concentrated within smaller households and dispersed across multiple social actors, the provision of care can no longer be understood as a private familial concern alone. Instead, it emerges as a broader social issue situated at the intersection of family, community, state, and market institutions.

Ultimately, the concept of care transition shifts scholarly attention away from the simplistic binary of joint versus nuclear families and toward the evolving processes through which care is produced, negotiated, and sustained. The central challenge confronting contemporary India is therefore not whether traditional family structures survive, but whether emerging social arrangements possess the capacity to maintain meaningful intergenerational support in an increasingly mobile, individualized, and ageing society. Reframing family transformation through the lens of care offers a more nuanced understanding of social change and underscores the continuing significance of interdependence in an era often defined by individualization.

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