

Challenging Ableist Norms: Old Age, Disability, and its Impact on Family Dynamics in Rohinton Mistry's Family Matters

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ABSTRACT:

This paper explores the intersection of old age, disability, and family dynamics in Rohinton Mistry's *Family Matters* through the lens of social constructionism. It subverts existing ableist norms that are nurtured through a conventional social lens. This study examines the effects of societal perceptions on disability and aging. These, in turn, affect familial relationships and individual identities. The analysis is fortified through the social constructionism theory of Peter Berger and Thomas Luckmann. This article delves into textual analysis and discusses subjectivity and objectivity with reference to the agonizing experiences of elderly people with disabilities within their families, the detrimental effects of ableism on mental and physical well-being, issues with family identity, and the complex and wide-ranging effects of discrimination against families with members who have disabilities. It affords a space to deliberate on existing societal perceptions of normalcy and functionality in contrast to the perspective posited by Berger and Luckman. The paper posits how 'social stock of knowledge' and 'zones of familiarity' influence the experiences of Nariman Vakeel, an elderly patriarch suffering from Parkinson's disease, whose physical decline forces his family to confront deep-rooted prejudices and expectations surrounding care, dependency, and the value of life in old age. By applying social constructionism, the analysis delves into how disability is not merely a biological condition but is shaped by cultural, social, and familial responses. The novel exposes the tension between the societal expectation of independence and the reality of vulnerability and how these constructs influence the treatment of the elderly and disabled.

INTRODUCTION

Disability and old age are global problems; both are closely connected in their influence on family dynamics. It is necessary to discuss their social connection and how society perceives disability and old age regarding functionality, power, and health. Ableism profoundly influences society's perception of old age and disability. Ableist society always prioritizes able-bodiedness and youth and prevents people with a disability from fully participating in society, and the ageist attitudes marginalize the elderly by seeing aging as a process of decline. Aging itself can become a disability in a society that prioritizes youth by limiting the elderly's identity to their deteriorating bodies. "Fertility rates have fallen to very low levels, and people tend to live longer; the result is that the population is aging quickly worldwide" (He et al., 2022, p. 1). Aging adults worry about their deteriorating physical and mental capacities. Avlund (2004) argues that aging is a dynamic process encompassing several changes in physiological and biological functioning and the capacity to carry out daily tasks. The connection between social relationships and aging is an essential factor to study. One component that guards against functional deterioration is social support. It is a well-established fact that individuals with strong familial and social ties are more likely to recover from severe illnesses.

According to Riddell and Watson (2014), the elderly and the disabled have historically been viewed as negative categories that go counter to an idealized view of adulthood. This idealized construction, which derides the status of the elderly and disabled in the family and society, is centered on ability, power, and productive potential within contemporary capitalist society. The notion that "the elderly" and "the disabled" are essentially dependent (and so passive) is noteworthy because it fails to acknowledge how definitional fiat creates reliance (Stone, 2003, p. 60). Furthermore, it disregards the idea that a member of either group could have much to offer the mainstream through mutual

understanding and acquired knowledge. People in society view these groups as inherently frail and dependent. Cultural and social narratives that highlight mental and physical decline have an impact on these beliefs, perpetuating stereotypes that can restrict the autonomy and dignity of both the aged and the disabled. Rohinton Mistry's *Family Matters* demonstrates how disability and old age are crucial in shaping the story's familial relationships. The interplay of age and disability shapes the dynamics inside the family. Nariman, the elderly and disabled protagonist, demonstrates how these factors impact not only his sense of identity but also the lives of those around him.

LITERATURE REVIEW

The current pertinent literature reviews emphasize ableism, ageism, disability, and family. Research studies on primary texts with an ableist theme are also reviewed. The importance of the current research is finally discussed, and there is a great deal of room for further research in this area. Ableism is an umbrella term that is inherent in the economic system and society and refers to a broad category of ideologies, including consumerism, anti-environmentalism, racism, sexism, casteism, ageism, and speciesism. It is a set of conscious or unconscious assumptions that support treating individuals differently or unfairly due to actual or perceived disabilities (Campbell, 2009, p. 4). Campbell discussed how disability is constructed through able-bodied norms. The prime importance of ableism is ability. Wolbring (2008a) argues that this preference for certain abilities over others leads to labeling. Dowrick, Keys (2021, p. 211) affirm that ableism defines a person in terms of their appearance and impairment and reduces stereotypes to carry the burden of stigma. Mik-Meyer (2016) makes it evident how co-workers view a colleague with impairment in able-bodied norms or ableism. In the opinion of Reel and Bucciare (2010), ableism assumes nondisabled people are "normal," and people with disabilities are deviating from this norm. In our media, literature, and entertainment, people with disabilities are present in this way. Old and disabled are depicted as "pitiable receivers" in relation to able-bodied characters (Margolis & Shapiro, 1987, p.20). As a result, people with physical and mental disabilities are oppressed by marginalization and cultural imperialism (Charlton, 1998). Social construction shapes one's identity (Ashforth & Schinoff, 2016). Being old or disabled is a socially constructed identity. The biological basis for disability is believed to be impairment, and the biological basis for aging is believed to be old age, which is why people may regrettably encounter ageism (Overall, 2019, p.127). Phelan (2018) feels that ageism is a complex, often negative social construction of old age, which takes place at the individual and societal levels and portrays aging and older people in a stereotypical, often negative, way. This social construction forced one to believe that ageism harms the individuals affected and society as a whole (Liat & Clement-Romer, 2019). The systems of ageism and ableism work to turn specific physical characteristics (limbs, organs, or systems) and specific life expectancy, respectively, into social obligations, justifications for inferiority, and sources of shame. Ableism and ageism are well connected and intertwined in malignantly effective ways that result in disrespect, reduction of autonomy, and disregard for the rights of those targeted. (Overall, 2019, p. 131). They were treated as if they were in a state of decline. The work *Family Matters* effectively blends ageism and ableism. The article titled *Conflict in Family Relationships: A Study on Rohinton Mistry's Family Matters*, tries to bring out the reason for disharmony in the family relationship, and through the psychological study on the characters, it shows how a family gets disrupted by misunderstanding. (Shahin&Partheban, 2021). Batra (2021) focused on post-colonial approach and outlined about *Family Matters* by Rohinton Mistry, concentrated on the Parsi identity, destitute and weak in society and political suppression. According to (Kandhway, 2024), the disability related researches have becomes a crucial topic in studies which challenges disability portrayals and traditional narratives. In the existing scholarly articles on *Family matters*, much attention has been. laid on disability, familial obligation, cultural identity, etc. In this study, the author maps the literature on ableism, ageism, disability, and family dynamics. From the provided literature review, it is evident that there is a significant research gap in studies attempting to examine the novel through ableism and its impact on family dynamics of old age with a disability. The intersection between ableism, ageism, and identity

confusion remains unexplored. The primary objective of the present study is to gain insight into how ableism influences the personal and family identity and family dynamics of people with disability and how the intersection of ageism, ableism, and disablism affects the social, mental, and psychological development of people with old age and disabilities.

METHODOLOGY

The research adopts a qualitative approach and content analysis to generate an interpreted and in-depth understanding of the intersection of old age, disability, and ableism and aims to uncover society's perceptions of 'normalcy' and its effects on self-esteem, psychological well-being, and family dynamics of elderly with impairment. Normalcy is a critical and neutral standpoint from which individuals observe the social disapproval associated with impairment (Titchkosky, 2000, p. 204). This methodology facilitates a deep understanding of how ableism intersects with ageism. The study systematically examines the textual representations of ableist attitudes and society's perceptions of old age with disabilities

THEORETICAL FRAMEWORK

The paper employs Social Constructionism, a sociological and philosophical theory pioneered by Peter Berger and Thomas Luckman, as its theoretical framework. The theory examines how individuals and groups perceive and understand reality. Reality is socially constructed; what we consider 'real' results from social processes and interactions, not as a direct reflection of objective reality (Andrews, 2012). The terms in which the world is understood are social artifacts, products of historically situated interchanges among people (Gergen, 1992, p. 267). Social Constructionism denies that our knowledge is a direct perception of reality; as a culture or society, we construct our versions of reality. Social Constructionism suggests that we are born in a world where conceptual frameworks and categories exist. Our knowledge is derived from looking at the world from some perspective or another (Burr, 1995, p. 6). In their classic text, *The Social Construction of Reality* (1967), Peter Berger and Thomas Luckman clearly state that the other in the face-to-face situation is more real and well presented (Luckmann & Peter, 1991, p. 42). From the social constructionist viewpoint, one could understand that disability is not just a biological or medical condition but is shaped by social and cultural narratives. The ableist ideologies frame disability in the context of old age as abnormal, inferior, or undesirable. This theory clearly states that disability is not a personal tragedy or individual experience but a social construct created through societal perceptions of "normalcy" and functionality. In an ableist society, old people with disabilities are viewed as unable, frail, and dependent and do not contribute meaningfully to society. Luckman and Berger in their work explains how reality is socially constructed through habitualization and institutionalisation. "All human activity is subject to habitualization. Any repeated action frequently becomes cast into a pattern, which can then be reproduced with an economy of effort and ipso facto is apprehended by its performer as that pattern" (Luckmann & Peter, 1991, pp. 70-71). Habitual behaviors also shape the societal view of aging and disability. The treatment of elderly people, especially those with disabilities, is governed by established customs and conventions in many societies. The habitual social expectations of the older, such as being dependent and non-contributor, can diminish an individual's sense of agency and lead to feelings of disempowerment. For policy and practice, it is important to comprehend the habitual social expectation of old age with a disability through the lens of social constructionism. Because all social policies, community services, and health care systems make their policies based on the common assumption that older individuals, especially those with disabilities, are passive recipients rather than active participants and contributors.

Objective and subjective reality exists in society. Social constructionism posits that much of what we understand as "reality" is socially constructed rather than objectively determined. The individual is a member of society who simultaneously externalizes his being into the social world and internalizes it as an objective reality. (Luckmann & Peter, 1991, p. 149). Social Constructionism also discusses the 'social

stock of knowledge' and 'zones of familiarity.' The familiar zone of social life is commonly centered around youth, health, and productivity, leaving the old and people with disabilities on the periphery of everyday interactions and societal expectations (Luckman & Peter, 1991, p. 59). Friedman (1999) suggests that if human reality objective is not defined then we concern the physical reality notion as impractical pleonasm. Failure to find objective human reality leads to frustration, and 'psychic reality will become an individualized experience shaped by socially constructed forces. It is a general tendency or social view to see the interaction between the aging body and disability as unfavorable because it diverges from the ideal of youth, physical strength, and independence, which are culturally appreciated. When ableism, disablism, and ageism intersect, the result will be marginalization and discrimination, which affect older adults with disabilities, their personal lives, family identities, and family dynamics.

THE ROLE OF FAMILIES IN ENABLING ACTIVE AGEING

Families are the basic building blocks of society. Each is influencing and shaping the other in multiple ways. It is the first and most influential agent of socialization, teaching children their society's cultural and social norms. Individuals learn about roles, expectations, and social relationships through family interactions. Family is a primary source of relationships since it provides support, nurturing, and guidance in family interactions Aquilino, (2006). Family members ought to be the first to provide the courage and support needed to uplift those physically impaired and provide them with a better quality of Life. Strong and healthy Family relations can have a profound impact on the well-being and growth of individuals with disabilities since they often rely on them for emotional, material, and financial assistance. Older people who retire from work and those who are ill or live with disabilities can remain active contributors to their families, peers, communities, and nations (WHO, 2002). The family members and society need to appreciate and approve of their ability and consider them normal human beings other than "others." We need to support Active Aging. "Active aging is optimizing opportunities for health, participation, and security to enhance the quality of life as people age." (WHO, 2002,12). It enables people to engage in society according to their needs, desires, and capacities and reach their full potential for physical, social, and mental well-being. Society's responsibility is to create an environment that allows people to realize their potential. This includes the opportunity to participate in society according to their needs, desires, and capacities. Families with ableist attitudes create a toxic environment for individuals with disabilities and elderly family members (He et al., 2022). When a family internalizes societal biases, they assume that individuals with disabilities are less capable or less valuable; this can lead family members to view them as dependent rather than understanding their unique strengths and needs. Coomy's views in the book illustrate how internalized ableism can result in the devaluation and dehumanization of family members who have impairments. Instead of providing genuine care, respect, and empathy, she expresses frustration and resentment. Those influenced by this mentality may feel neglected, alone, or have less value in themselves.

Families with disabled members may find their dynamics affected by a wide range of intricately intertwined factors, including the parents' values and preferences, the family's financial and sociometric status, the availability of support services, the family's culture, traditions, and beliefs, and most importantly, the severity of the disability.

(Iacolino et al., 2016, p. 41).

A "family schema" (Hastings & Taunt, 2002, p. 122) is essential to how a family perceives the world. A positive outlook may be a part of such a schema, which can profoundly affect family life overall well-being, and family stability. The importance of the shared beliefs, meanings, and values that a family develops to coordinate their interaction patterns. In the context of Nariman's family, ableist perspectives regarding Nariman's disease have molded the family schema and are deeply influenced by cultural norms, generational tensions, and ableism, all of which have a profound impact on Nariman's life. His declining

health reduces his agency from a patriarch to a passive and reliant one. People with disabilities feel more valued and welcomed when the family schema prioritizes inclusivity, respect, and support. This fosters an atmosphere in which a person's disability is viewed as an asset rather than a hindrance, which lessens feelings of inferiority or loneliness.

Families are a social group and the primary means through which cultural traditions and values are passed. Members of social groups are those who consciously share characteristics, such as social customs, values, and beliefs. Though many view the family as a primary and universal social organization, different cultures, societies, and individuals may have diverse ideas about what makes a family. According to Engels' (2001) account in *The Origin of the Family, Private Property, and the State* propagating and sustaining systematic ideas and economic concerns are the two primary factors in creating and maintaining families. In today's consumerist society, it is considered seriously how these elements may negatively impact the elderly and disabled. The general assumption about disability and old age is that they cannot contribute much to society. This is the real reflection of the ableist concern of power and wealth. This can lead to the marginalization of the elderly with disabilities. As we move into the twenty-first century, global aging will pressure all nations' social and economic systems. However, elderly people are a valuable resource that is frequently overlooked and contributes significantly to the fabric of our societies. In every nation, most elderly remain invaluable to their families and communities. Numerous people still labor in formal and informal sectors (WHO, 2002).

People with disabilities may feel pressured to live up to societal norms, which may not be realistic or appealing to them. It may also result in a lack of support and accommodations for the special needs of disabled people from their families. It is necessary to make sure that all family members—including those with disabilities—are respected, included, and supported, which is critical to identifying and combating ableist beliefs and behaviors.

Oliver (1983) points out that many families now face an increased care burden due to the growing number of elderly individuals in the general community. Individuals with old age and disabilities face more significant challenges in society and the labor market and in their own families than able-bodied individuals. A growing body of research finds it will affect their identity and family dynamics. In the family, disability has a significant impact on opportunities and relationships. When a family member is disabled, it can adversely affect the stability of the family unit and, in some instances, erode "familial bonds" (Oliver, 1983, p. 77). Whyte, Ingstad (1995) states that in the global setting, the majority of disabled persons experience both disabling barriers and barriers within the family. The Life experiences and chances of old disabled people merit particular attention. People with old age and disabilities often face attitudinal and environmental barriers. Emphasizing power and profit systematically dislodged marginalized groups from access to even basic resources such as food and livelihood.

We can see a 'generational system' and its impact on all aspects (Priestley, 2006, p. 84) In this generational system, a hierarchical structure within families and societies, the elderly and the disabled have historically been viewed as negative categories that go counter to an idealized view of adulthood. The younger generation dominates because of their social, economic, and cultural influence, while the older generation and people with disabilities are marginalized. This marginalization is reflected in various aspects of life, such as value systems, caregiving, and decision-making. Rohinton Mistry vividly portrayed this generational system and its impact through the character Nariman Vakeel, an elderly, ailing patriarch. As his illness worsens, he is pushed to the margins of his own family and life. His life and decisions are controlled by younger generations who view his care as a burden rather than a familial duty. Sayogie et al. (2023) describe patriarchy as a cultural phenomenon that is passed down from one generation to the next, commonly without conscious awareness. Social constructionism suggests concepts like "patriarchy" and femininity". masculinity" is not solely determined by biological factors but created and maintained by society through habitualization. The ableist power concept is evident in all these concepts.

INVISIBLE STRUGGLE: AGING AND ABLEISM IN FAMILY RELATION

Wolbring defines ableism as a "system of ideas, behaviors, and processes that result in a specific understanding of oneself, one's body, and one's relationship with other people, other species, and the environment based on abilities one exhibit or values" (Wolbring, 2008b, p. 253). It also includes how others judge one. Ableism enters through art, culture, religion etc. Art and culture are deeply interconnected. Society's ideals, beliefs, and experiences are reflected in its art, literature, music, and dance, among other forms of cultural expression. Literature is one of the best tools for spreading ableism, so studying ableism from a literary background is urgent and essential. The well-being and dignity of every family member depend on addressing ableism within the group. It is essential to look at how ableism impacts society and culture before discussing how it relates to family interactions. "One internalizes culture from society to reproduce the way of being" (Anthropologist et al., 2019, p. 69). Culture and society are analytical tools for studying ableism and its effects. It is frequently stated that disability presents a problem to how the body is portrayed. Generally, it indicates that the disabled body sheds light on the idea that all bodies are socially constructed and that social ideas and institutions have a far more significant influence on how the body is represented in reality than biological facts (Siebers, 2001). People with disabilities have different body conceptions that impact not just their personal lives but also their family relationships and life in general. By designating 'disabled family,' 'struggling family,' and other labels, the body idea marginalizes individuals with disabilities and also casts doubt on their family's reputation and identity. The cultural concepts of a 'happy family' and 'ideal family,' 'good' family, and 'strong' family are subjective realities that frequently uphold unjust and discriminatory norms. These standards are usually predicated on ideas of perfect physical, mental, and financial health, which can marginalize families with members who have impairments, feed into the prejudices of the ableist movement, and demonstrate how communities have preconceived notions about what is expected, ideal, and sound (Otto, 1962). These ideal, expected, preconceived notions create social barriers and subordination of the family status. (Goodley, 2014). Family members have internal working models of family communication and relationships based on the schematic representation of relational knowledge. These internal models, or family communication schemata, are knowledge structures that represent the external world of the family and provide a basis for interpreting what other family members say and do (Fitzpatrick & Ritchie, 1994, p. 276).

The psychological, social, economic, and cultural aspects of ableism generally prioritize able-bodiedness. They also support harmonious forms of personhood and health and create space fit for normative citizens. These societal expectations may entail extra challenges for families with impaired family members as they navigate not just the day-to-day grind but also potential discrimination, stigma, and prejudices that exclude people with impairment who do not measure up to these ableist ideals.

Ableism expresses the belief of some social groups and institutions that particular abilities are valuable and should be encouraged. This preference for specific abilities, power, and status over others leads to the labeling of personal and family identity. People with disabilities are viewed as sick people in societies where ableism is prevalent, and disabilities are associated with physical functions and also have an 'overwhelming tendency to reduce their humanity to their physical injury' (Agmon et al., 2016, p. 15). Their families are most frequently described as 'suffering families,' 'burdened families,' and 'struggle families,' which shape the community's understanding of personhood and family identity. This has a negative impact even within the dynamics and relationships inside families. "A family re-conceptualization is important in moving away from scarce paradigmatic conceptions and also to highly potential family conception" (Kane, 2019, p. 65). Grech (2012) makes it rather evident when he says that disability culture appropriates some ableist standards like autonomy, control, and independence, which disability is invariably associated with stereotypes of negativity, constraints, and beauty. It is more than just a fear of the unknown or a phobia of the unfamiliar or foreign. Disability and impaired bodies, on the

other hand, are positioned effectively in the "unthought domain" (Campbell, 2009, p. 13) "Families are dynamic systems that adapt to the needs of their members and those outside of them" (Cox & Paley, 1997, p. 243). To Gerhardt (2022), this dynamic deals with the inner workings and behavior of the family, the ways culture and society affect it, and how its members influence each other. The prevalence of ableist worldviews leads to the development of disablism, Grech (2012). It may intrude into family dynamics and exert an adverse effect. Ableism introduces emotional, economic, and social stress, upsetting the family as a dynamic system in the family. Studies on ableism in family contexts show that ableism can affect family dynamics in several ways. People with disabilities suffer from a lower quality of life when ableism infiltrates their families. Along with causing family tension, impatience, bewilderment, and emotional instability, it will also impact "coping mechanisms"(Lara & de losPinos, 2017, p. 421).

The negative impact of ableism on older persons is enormous.If they live in a stressful home where there are constant arguments, harsh criticism, and unreasonable expectations, it damages them mentally and physically. People with disabilities may experience role conflict, rigidity, entanglement, isolation, and unclear communication as a result of unhealthy family dynamics, which can also contribute to physical and mental health problems and impact both their future well-being and social behaviors. The societal expectations placed on families with impaired members may present additional challenges as they navigate not just the day-to-day demands but also potential discrimination, stigma, and prejudices. For example, families who have physically challenged members may have trouble finding inclusive employment, education, and support services. People may also run across misinterpretations and opposing viewpoints from others, which can affect how they feel included and cared for in the community.

QoL- Quality of Life concept is a lengthy concept. From a medical point of view, a "disability-free life" is a component of quality of Life (WHO, 2002, p. 12). Fernández-Ballesteros (2011) argues that this concept often equates a higher quality of life with the absence of disability, reinforcing the idea that living with a disability is inherently a lower quality of life. People with disabilities' QoL considers the similar dimensions and factors which are relevant on the people without disability. According to Lara and Pinos (2017), a person can obtain a quality of life if their basic needs are met and they have equal opportunity to set and meet goals in the three most essential contexts—the family, the workplace, and school. Ableism denies all these opportunities.

Home environments are more than just places where people interact; they are also all the behaviors and relationships that make space for everyone, regardless of circumstances (Gibson et al., 2012). Thus, home environments—whether residential or institutional—have the potential to be supportive and empowering, but they may also serve as places of dread or isolation, which can have a negative impact on one's health, well-being, and capacity to engage in social activities. Families who include members with physical disabilities may experience prejudice or stigma since they do not meet this idealized stereotype. Feelings of loneliness and unease may result from this. Societal standards can influence family responsibilities and expectations. For instance, family members may have pressure to provide the customary care that people with disabilities require, which may have an impact on their personal and professional lives. People with disabilities and their families may experience negative stereotypes and misconceptions about disability that are spread by society, which can affect their mental health and sense of self-worth. The pressure from society to meet rigid beauty or ability standards, as well as internalized ableism, can intensify emotions of guilt. Family members' animosity and remorse demonstrate how societal ableism affects their thoughts and actions.

Mistry criticizes the greater society's failure to confront ableism through the hardships of the individuals, as well as the family's incapacity to deal with handicaps in his novel *Family Matters*. "In Indian English Literature, older men are rarely featured" (Kumar, 2023, p. 1). One of the most significant depictions of elderly male characters with a disability in Indian literature is Nariman. Mistry uses Nariman's character to critique how older adults are often dismissed and neglected when they lose their physical capacities. This reflects a broader societal disdain for aging bodies and explores how older

Indian men with disabilities are treated in 20th-century India. It also explains how ableism functions in society and within families and how intersectionality and social change influence male aging in India. *Family Matters* looks at the relationship between aging and ableism. Old age in the novel is not just a physical frail but examines how aging intersects with ableism. Mistry successfully explores ageism and ableism and how they adversely affect family dynamics and cause significant emotional and psychological distress for disabled members.

In his novel *Family Matters*, Rohinton Mistry explores the inner workings of ableism in a Parsi family that causes psychological and physical challenges to a 79-year-old Parkinson's disease sufferer, Nariman Vakeel. Nariman breaks his leg when he goes for a walk and becomes helpless. The novel realistically portrays Nariman's helplessness and the family members' hesitation and avoidance to look after him. The book focuses on the ableism that Nariman experiences from his own family, particularly from his stepchildren Coomy and Jal, who are unwilling to take care of him due to his disability. As an elderly person with physical disabilities, Nariman deals with the psychological and emotional ramifications of ableism in addition to the physical difficulties posed by his sickness. He knows how much of a strain he puts on his family, and as a result of his internalized ableist beliefs, he experiences guilt and humiliation frequently. The contempt and apathy of Coomy increase his fragility and heighten his sense of powerlessness and loneliness. Ableism often manifests through behaviors and attitudes (Wexler (2021)). Coomy's treatment towards her stepfather highlights the ableist attitudes that fade familial relationships. Coomy's actions and attitudes towards Nariman are the result of her social perception that old age with disability is a burden. It reflects a feeling of annoyance and frustration that the younger generation may have for the aging and disabled people in their community. Youth is valued, and it is impossible to deny its importance. Old age is a social construct. We have complex opinions about aging that include both positive and negative aspects. Kite et al., (2002) state that these ageist attitudes stem from cultural beliefs about older adults and the aging process "The modernization of society has led to older persons losing their social standing. younger people are thought to possess the knowledge, skills, and abilities valued by modern society" (Liat Ayalon Clement-Romer, 2019)

After his fall and subsequent bedridden status, Coomy's already strained relationship with him worsened. She views his condition as an imposition on her Life, and she is reluctant and resentful in her efforts to care for him. This is evident in her decision to send him to Roxana, her half-sister, under the guise of a temporary arrangement, which ultimately turned into a permanent one. Coomy's actions highlight a lack of compassion and an unwillingness to acknowledge the old value and dignity. The utilitarian perspective puts economic efficiency and personal convenience ahead of family responsibilities and respect for the elderly. Coomy's activities disregard these individuals' emotional and psychological needs. Ableism plays a significant role in the Generational issues. During Nariman's hard times of disability, Coomy acts as a headmistress who enacts rules for helpless school girls. She patronizes and controls him by enforcing strict rules and routines. In the morning, he was not to get out of bed till she came to get him. A bath was possible only twice a week; there were more rules regarding his meals, clothes, dentures, and use of radiogram (Mistry, 2002, p. 2).

Coomy's action is out of her frustration and resentment. She infantilizes Nariman, assuming that he cannot make decisions for himself. "A stubborn child, that's what you are" (Mistry, 2002, p. 4). Mistry highlights the hard reality that many elderly people in today's society must face via the lens of Coomy's character. In contrast, despite her personal and financial hardships, Roxana's care for Nariman represents a more humanistic and compassionate attitude. Her commitment highlights that, despite Coomy's disregard, caring for the elderly is still essential. The characters of Coomy and Roxana Mistry depict the ableist and anti-ableist attitudes in the same novel. The idea that disability and old age are wastes is essentially ableist. In Rabheru, Gillis's (2021) opinion, ageism destroys people's dignity and well-being and is extremely malignant, widespread, and harmful to civilizations. Coomy's decision to change the

settings of her apartment to prevent Nariman from arriving from his daughter's residence is a clear example of her ableist mindset. She shatters the plaster covering Nariman's bedroom ceiling.

Human aging is not solely a physiological process. It is embedded in social contexts and is shaped by social factors. We grow old within a social network of partners, family members, and friends. We have explicit and implicit assumptions about older people. These assumptions, expectations, and beliefs shape human aging. We over-generalize and treat older people, aging and old, in a stereotypical manner. This stereotypical construction of older people, aging, and old age is called "ageism" (Liat & Clement-Romer, 2019, p. 30). Nariman is an English professor who loves reading books, which has changed his traditional thoughts and views. However, to his conventional orthodox family, his love for the Non-Parsi Christian girl, Lucy Braganza, was a great crime. Nariman's subjugation, inability to express his desires, and this love affair force him into an unpleasant life. The primary reasons for the ableism Nariman experiences in his family are the customs of the Parsi community, the traditional beliefs around disabilities, and the stigma associated with them. Nariman's non-Parsi girlfriend, Lucy Braganza, is the object of his traditional Parsi family's hatred, and they pressure him to marry Yasmin, a Parsi widow. The family sees Nariman's love for a non-Parsi woman as a threat to their cultural identity, and their intolerance of it feeds into their ableism. Families with disabled members experience poverty and financial difficulties (Elwan, 1999). The economic instability of family members limits their ability to provide the best care and assistance. Relationship stress also arises from the family's incapacity to adequately address each member's needs. Caregiving under such circumstances can become demanding, and conflict within the family may arise as individuals attempt to reconcile their financial burdens with their familial obligations. Disablism is a set of assumptions and practices promoting unequal treatment (Campbell, 2009). These differences show how socioeconomic status influences family dynamics and caregiving experiences. As Nariman's health declines, Yezad and Roxana care for him. This added responsibility strains them financially, affecting their families and way of Life. Coomy was unwilling to provide Yazad and Roxana Nariman's pension while they ran low on funds to care for their father. The family members must pay extra attention and care when disability member is there in the family. There may be issues like imbalance in the family system, negative feelings, and problems with caring. All of these are present in Nariman's family, adversely affecting the family dynamics. This is clear in Coomy's words: "The strain is killing me, my back is shattered, let us hire an ayah" (Mystry, 2002, p.81).

The obligations of caring for a person might cause mental fatigue, such as an ongoing need for attention, trouble utilizing healthcare systems, and the emotional toll of witnessing a loved one suffer. Every child's differential characteristics and also risks information must be seek out. Weariness has generated from this unknown and extra job which may transform the family quality life as it needs higher time of dedication to child with difficulties and may resulted to lacking of care for other people (Lara & de losPinos, 2017). Parents of those with disabilities may have anxiety about their child's future, particularly in a society that may undervalue or minimize the abilities of those with disabilities.

Family members could become misperceived if they take in social criticism and worry about being associated with a disability. Societal attitudes and opinions might be reflected in the labels and references that are applied to families of individuals with disabilities. Terms like 'other family,' 'challenged family,' 'burdened family,' and 'sacrificing family' can polarize society and perpetuate unfavorable perceptions about individuals with disabilities. Since these titles imply a hierarchy of worth or normalcy based on ability, they can be damaging and isolating for families and individuals. Ableism is a conceptual instrument that governs the procedure and structures of civil society and belongs in the genealogy of knowledge space. Mainly, the ableist perspective holds that disability or impairment is something that cannot be improved upon, cured, or even completely removed Campbell (2009) states that whatever its type, impairment, or handicap is intrinsically harmful and should be treated, cured, or even completely removed if the chance arises. Families that care for individuals with disabilities may feel inferior, alone, and different from what society views as 'normal' as a result of these beliefs. Due to these

classifications, Family members may perceive themselves as inferior or abnormal. It leads to family identity confusion and impacts family dynamics. According to social constructionism, "reality is socially built, and the sociology of knowledge has to examine how this happens" (Luckmann & Peter, 1991, p. 13). Social constructionism posits that "social interactions and shared meanings construct our understanding of reality" (Andrews, 2012, p. 41). This perspective is particularly pertinent to the analysis of Rohinton's works, as it highlights how these narratives challenge and redefine conventional notions of identity and normalcy, emphasizing the role of social processes and cultural contexts in shaping individual identities and experiences.

CONCLUSION

The battle of disabled people is not only against societal prejudice but also against ableism within the family. *Family Matters* offers a critical perspective on how ableism functions not just in public domains but also in the private sectors of family life, where age and disability interact to expose systemic prejudices. In *Family Matters*, Mistry could illustrate the negative impact of ableism on individuals' sense of worth and fracture family dynamics, leading to serious psychological problems such as resentment, stress, and guilt. The book provides insightful analyses of how ableism influences family relationships and personal and family identity. Grounded in a social constructionist theory, the research emphasizes the ableist role of social processes and cultural contexts in shaping individual and family identities and experiences. According to a social constructionist perspective, societal perspectives shape the definition of a family. It highlights the importance of understanding ableism as a complex, varied, comparative process with a solid social underpinning. Families with members who are disabled navigate a complicated world where internalized ableism, stigmatization, and social estrangement impact their identities and experiences. The existence of ableism affects the responsibilities, relationships, and duties that families of people with disabilities have towards one another. The majority of parents faced discrimination and persecution because of their family members with disabilities. According to social constructionism, disability results from cultural norms, beliefs, and power dynamics rather than an individual trait. We may oppose ableist narratives, advance inclusivity, and create spaces where families with disabilities feel empowered to proudly and dignifiedly proclaim their identity by acknowledging the social construction of disability. Families and individuals must prepare for old age and maintain good health habits. Accessible infrastructure, such as transportation, housing, and community spaces, make an age-friendly environment and enable senior citizens to be connected, active, and involved. Additionally, it should provide avenues for significant social engagement through cultural events, social services, and community programs meant to lessen isolation. To build a more just and inclusive society for everybody, embracing diversity and removing obstacles to participation is imperative.

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