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Elder Care for Religious Practitioners in Monasteries: A Case Study of Rongwo Monastery

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Abstract: Elderly monks in monasteries constitute a distinctive group, yet their old-age care rarely attracts public attention.This study mainly focuses on monks aged sixty and above in Rongwo Monastery in Qinghai Province, China, and compares their circumstances with those of elderly monks in other Gelug monasteries in China.This article also explores through field observation, questionnaire-based interviews, and documentary research how the elderly monks' living places have changed, how they are cared for, and what kind of social security they have access to, thus offering an overview of elder care among this special social group.

1. Introduction

In the context of the global trend of population aging, the later lives of elderly monks in Tibetan Buddhist monasteries have slowly garnered academic interest. The majority of Gelug monks are of a young age when they enter monasticism and take the vows of celibacy very seriously, and live in the monasteries for long periods of religious study and practice. Their old-age support systems are thus very different from the traditional Chinese system of depending on children in old age. Drawing primarily on the author's fieldwork at Rongwo Monastery in Qinghai Province, China.

Rongwo Monastery is located in the Tongren area of Qinghai Province, China. It was established in 1301 by a nephew of Phagpa, and was originally known as *Rekha Gönkhang*, literally "a house for reciting scriptures on a cliff"[1][2]. The monastery also was called Drakkar Shar, which literally translates as "the rocky cliff first illuminated by the rising sun," and hence the lineage of reincarnated monks became known as the Shartsang lineage. [3][4]The monastery was originally affiliated with the Sakya school, but later became affiliated with the Gelug school and gradually developed several monastic colleges, including colleges devoted to sutra studies, tantric studies, and Kālacakra teachings[5][6][7].

2. The Compassion of Religious Practitioners: The Traditional Tibetan Buddhist System of Elder Care

The "Seven-Household Monastic Support System", in which seven peasant households supported one monk, was already in place during the period of the Tubo Empire[8]. Until the modern period, monks continued to be supported primarily by local authorities, monastic estates,

and dependent households. The Gelug monastic system of elder care is based primarily on Buddhist religious ethics, such as the development of virtue, respect for the elderly, and mutual aid. The Buddhist ideal of compassion and benefiting sentient beings emphasizes the obligation to assist the elderly, vulnerable individuals, and those suffering from illness. In the traditional monastic system this ideal has been manifested and realized in the master-disciple relationship[9][10]. When a master grows old, his disciples take care of his daily needs. This type of care reflects the disciples' repayment of their master's guidance and is also an expression of compassion and gratitude. Meanwhile, lay donors' almsgiving and natal families' care are important additional ways of traditional old-age provision. The sites examined in the current study (Rongwo Monastery in Qinghai, the Potala Palace and Tashilhunpo Monastery in Xizang) suggest that this traditional master–disciple model is still very much in place in the care of elderly monks.

The master–disciple relationship remains the principal traditional form of elder care in Tibetan Buddhist monasteries. Master Yeshe, a monk at Rongwo Monastery, explained: "Traditionally, an elderly monk would accept a newly arrived monk as his disciple, allow him to live in his monastic residence, provide him with food, and take responsibility for his initial religious education. This master–disciple relationship would continue until the elderly monk's death. As the master grew old, the disciple would care for him and assist him in his daily life."[11]

In some cases, the disciple continues to use the monastic residence after the master's death. The master–disciple relationship thus has two purposes: to pass on the teachings of Buddhism and to support the master in old age. Monks with greater scholarly standing tend to have more disciples and thus more secure support in old age. Thus, whether a monk has disciples or not is a fundamental factor in his old-age security in the monastery.

If an old monk has no disciples or the disciples are not there, then the natal family takes on a secondary caregiving role. For instance, a female relative who cares for an elderly monk described her family's arrangements as follows: "Our family discussed it and set up some rules: each household takes turns to visit Rongwo Monastery, we regularly clean his monastic residence, wash his bedding and clothes, buy butter, rice, and flour, boil water, cook for him, and stay at the monastery for a period of time to accompany and care for him." [12]Disciples and family members also seek medical treatment, purchase medicines, accompany elderly monks to medical appointments, and help them with daily activities when their mobility becomes limited.

At the same time, laypeople and residents of surrounding communities help the old monks with monetary donations and gifts of material things. In the case of the end-of-life stage, the available oral accounts from Rongwo Monastery do not mention specific rituals. However, relevant studies indicate that a familiar monastic setting, the presence of other monks, and Buddhist rituals can offer spiritual support to the very sick or to the dying.

3. Compassion and Institutions: The Transformation of Elder-Care Models

3.1 Social Insurance for Monks

After 1949, monasteries could no longer rely on dependent households, monastic estates, and similar sources of support, and therefore had to become progressively more self-sufficient. However, there were disparities in the size and influence of the monasteries, which resulted in greater differences in their capacity to attract offerings from lay devotees. Influential monasteries like Labrang Monastery in Gansu, Jokhang Temple in Tibet, and Kumbum Monastery in Qinghai still had a large number of devotees and supported significant monastic communities. In contrast, some small monasteries in remote places sometimes had difficulties maintaining themselves. These differences also resulted in substantial differences in the provision of old-age support for monks. In

general, large and influential monasteries could provide for older monks in the monastery, whereas monks from smaller monasteries were more likely to return to their natal families for care.

Since the beginning of the twenty-first century, in view of the disparities among monasteries, China's State Administration for Religious Affairs has gradually introduced social security measures to support elderly monks, primarily through medical and pension insurance. In 2010, the State Administration for Religious Affairs published the Opinions on Properly Addressing Social Security Issues for Religious Clergy. In 2012, monks in monasteries in Tibet, Qinghai, Gansu and other parts were enrolled in the social insurance system, so that those who are sixty years old or older can receive a monthly state pension.

Elderly monks who are still healthy continue to engage in monastic practice and the transmission of Buddhist learning, and receive state social insurance benefits[13]. They can also continue to conduct religious services and receive offerings, which can give them extra income when they are old. Yeshe, a monk at Rongwo Monastery, explained: "Rongwo Monastery currently has an approved quota of 600 monks, 36 of whom are over the age of sixty. The oldest is now eighty-eight. Under the monastery's regulations, monks over sixty receive certain allowances from the monastery in addition to the state pension subsidy." [11]Kelsang, a monk at Tashi Lhunpo Monastery, stated: "Tashi Lhunpo Monastery has a total of 962 monks. More than twenty are between sixty and eighty years old, and more than ten are over eighty. In addition to receiving state subsidies, elderly monks who still have sufficient energy may join in scripture recitation and receive offerings from devotees. They are permitted to keep these offerings for themselves." [14]A monk from Shalu Monastery similarly explained: "In addition to monks' social insurance benefits, when local residents invite monks to perform rituals or recite scriptures, the monks may retain the offerings they receive and use them to support themselves in old age."[15]

3.2 Residential Elder-Care Facilities for Monks

Monasteries constitute the principal setting in which monks spend their later years. However, in traditional times, there were no separate buildings in monasteries that were dedicated to the care of the elderly. Starting in 2014, the State Administration for Religious Affairs in China began constructing separate elder-care facilities in monasteries to provide centralized residential care for elderly monks. Nowadays, there are many monasteries that have their own facilities for this purpose. Rongwo Monastery has designated an elder-care area, but the facilities and functions are still in the process of development.

Kumbum Monastery in Qinghai began developing institutional elder care relatively early. In addition to residence-based care, it established an elder-care home to provide centralized support for monks who have no one to care for them, a guide at the Potala Palace, explained: "The Potala Palace currently has 76 monks, more than ten of whom are over sixty. Most of them live in an elder-care facility situated on the western side at the foot of the hill within the Potala Palace complex." Kelsang, a monk at Tashi Lhunpo Monastery, stated: "We not only have a dedicated residential facility for elderly monks, but also a specialized Tibetan hospital where they can receive treatment free of charge. If a monk is too old to visit the hospital, our doctors will provide treatment at his bedside." [14]Drepung Monastery has likewise established a separate residential building for elderly monks.

The elder care facilities of the Rongwo Monastery are mainly situated in the southern part of the monastery. Yeshe explained: "The monastery does not have a completely separate residential area for elderly monks, and many monastic residences are shared by masters and disciples. But under the rules of Rongwo Monastery, monks over 60 years old can eat free of charge in the dining hall of the

monastery's elderly-care facility, and during festivals they are also provided with rice, flour, and cooking oil."[11]

4. Care and Support in Later Life: Practical Challenges Facing the Tibetan Buddhist Elder-Care System

4.1 The Declining Stability of Master–Disciple Caregiving

Master-disciple relationships are still the mainstay of elder care in today's monasteries. But the strength of these old ties has slowly eroded. First, with fewer children in Chinese families, there are fewer young monks. Second, younger monks are more mobile, and those who go out from their monasteries to study Buddhism in other places are unable to give their masters constant company and care. Thirdly, the young monks have to study the scriptures, hold religious assemblies, and do monastic work, and they cannot be fully engaged in providing care for the elderly monks. Even monks with disciples face these difficulties. The situation is still more precarious for monks without disciples and for those living in less influential monasteries that receive fewer offerings. Today, fewer and fewer young monks are willing to stay at a monastery for a long period of time and take care of the elderly masters full-time. At Rongwo Monastery, an eighty-eight-year-old monk does not have a disciple to care for him; instead, his relatives take turns cleaning his residence, washing his clothes, delivering supplies, and staying with him."

4.2 Limitations of Family Care

Family care is still a significant additional source of old-age support for monks, but it also has a number of drawbacks. First, rotational care provided by family members is often insufficient to address emergencies: "One member of our family is a monk at Rongwo Monastery, and we now take turns caring for him. However, every household has its own farming or pastoral work, domestic responsibilities, and children to look after, so none of us can remain at the monastery for an extended period. If he suddenly becomes unwell, we live too far away to reach him immediately." Second, female family members encounter practical restrictions when caring for monks: "Under ordinary circumstances, we can take turns entering the monastery to care for him and help with cleaning and laundry. But the monastery's annual summer retreat starts tomorrow. During this time, women are not permitted to enter the inner monastic precincts freely, so we will no longer be able to enter the monastery to care for him."[12]

4.3 The Lagging Development of Institutional Support

As the social structure has changed, responsibility for supporting elderly monks has gradually shifted beyond master-disciple and family relationships toward broader social and institutional provision. The monastery still plays the main role in providing care for the elderly, but the role of the management committee of the monastery has been growing. For instance, at Rongwo Monastery, the committee has started to arrange care for the elderly monks, disabled monks, and monks without disciples. Master Yeshe of Rongwo Monastery explained: "At present, when an elderly monk does not have a younger disciple or another monk responsible for his care, the monastery management committee appoints a monk to look after him. In return, the monk who assumes this caregiving responsibility is granted certain exemptions or privileges."[11] These institutional arrangements, however, serve primarily as a minimum safety net and cannot in themselves ensure a satisfactory quality of life for elderly monks. Both the detailed design of these measures and their practical implementation continue to lag behind existing care needs.

5. Conclusion

The elderly Tibetan Buddhist monks make up a unique social group, which has not been studied extensively. The principal responsibility for supporting monks in old age has gradually shifted from traditional master-disciple care within monasteries toward a more diversified system incorporating family support, offerings from lay devotees, and China's social security system. That is, the relative importance of the various types of elder-care provision is changing. The institutional arrangements for later life care of the elderly monks have been somewhat improved over time, but there are still a number of issues regarding later life care and end-of-life care, as revealed through fieldwork and questionnaire-based interviews, mainly at Rongwo Monastery. These are the lack of professional care teams for monks who have functional impairments, inadequate access to emergency medical services in remote monasteries, the lack of knowledge of first aid among disciples and family members, and the concern about the overall quality of life of elderly monks. Further improvements are therefore needed in facilities, institutional arrangements, and caregiving provision. In general, it is clear that the wider coverage of social insurance and the building of residential elder care facilities have helped to improve the situation of monks in their old age, albeit slowly, while the practical aspects of the elder-care system continue to be problematic. The Gelug ideal of mutual care and support is maintained by the monks continuing to live in the monasteries when they grow old. In practice, shared responsibility among the state social security system, wider society through offerings and donations, and monks' natal families provides stronger practical support for monks in old age.

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