



INDIAN ELDERLY-AN OVERVIEW

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Abstract

Indian elderly are encountered with innumerable problems that are associated with ageing process. 2011 census report highlights the plight of Indian elderly who still work for their livelihood. Seeing a surge in the need for taking care of elderly there is mushrooming of old age homes all across the country. Majority of these old age homes function mainly aiming at profit making providing very minimum facilities for the senior citizens. There are lots of psychological problems the elderly face in their day to day life. Social workers and the government need to initiate lot of programs and activities for older persons to meet their growing needs. Disabled elderly is another category of people who need much more care and attention. On the whole old age is marked with various problems that need to be addressed rightly to keep the ageing population happier and healthier.

In comparison with developed nations developing countries like India, Bangladesh and many other countries are witnessing a steep increase in the elderly population. Developed countries have very less percentage of elderly in their population thus becomes easy for the government to take care of them. On the contrary developing countries like India are increasing their share of elderly in the total population thus leading to new challenge in taking care of the elderly. Changes in the family structure, social system and emergence of single child norms have pushed senior citizens to seek various avenues for shelter and care.

Working Elderly

It is a worrisome fact that 41.6% of the Indian elderly are still working. A stage wherein they need to take rest they are forced to work. It is an indicator on the plight of the elderly of our nation. On one hand it is a welcome status that the elderly are still active with some work.

Elderly Population Working (%)

Population	Male	Female	Total
Rural	66.4	28.4	47.1
Urban	46.1	11.3	28.5
Total	60.4	23.4	41.6

*Sources: Population Census 2011, SRS Report 2013

Disabled Elderly

Old age is marked with disability in different forms. Due to old age and health problems related to old age many become disabled. Falling is one of the reasons for the disability. Health problems such as dementia, Alzheimer's disease, Parkinson's disease, diabetes, hypertension, cancer, heart and cardiovascular problems, respiratory diseases, liver problems, stroke, Musculoskeletal problems, anemia and bed sores, falling & orthopedic problems and Mental health problems contribute substantially to disability at old age. These diseases cramp the mobility of the senior citizens restricting themselves within four walls and making them immobile and disabled.

Physically Disabled Among 60+ (%)

Population	Male	Female	Total
Rural	5.71	5.47	5.59
Urban	4.36	4.01	4.18
Total	5.31	5.04	5.17

*Sources: Population Census 2011, SRS Report 2013

Apart from this there are older persons who are differently abled right from their child hood. Even though the coping mechanism in such persons will more still they need helping hand from others.

Support system for the Elderly

What do senior citizens need in their old age? Apart from food and shelter they need emotional support, sympathetic friends and caring children, friendly and understanding care takers, stress free environment and mainly a life free from loneliness, anxiety, depression, fear and isolation. It is the responsibility of the children and care takers to keep the elderly happy. Emotional support in the form of visiting and taking care of the elderly, wishing them on anniversaries, birthdays and



festivals keeps them happy. It should also be ensured that they are taken to short trips, tour to nearby places to avoid boredom and monotonous life. Religious prayers keep the spirits of the older persons high hence they can be actively involved in prayer services.

Mushrooming of Old Age Homes

Unlike developed countries old age homes in India are in the nascent stage. A complete understanding on the need and understanding of the elderly is lacking in India. Old age home are places where in older persons stay either individually or with their spouse or with their family members. These old age homes provide food, shelter, health care and other services either free of cost or by charging the persons who are staying with them. Sensing the rapid surge in the elderly population lot of old age homes have started mushrooming targeting the affluent elders and pensioners who get a stable income. Even though few old age homes function with real service mentality many old age homes are functioning with the main objective of financial benefit capitalizing the advantage of the senior citizens requirements.

It should be made mandatory that old age homes should get certification from Government authorities. Government should strictly impose norms to run old age homes bearing in mind the needs and requirements of elderly. Right from room size, space availability for each individual, facilities like ramp and rails at requisite places, laundry services, health care services, counseling services, recreation, religious prayer halls, guest rooms, trained care givers and so on should be provided for the welfare of the elderly.

Major reasons for death in old age

Major reason for death at old age in India is due to non communicable diseases (NCDs). Cardiovascular Diseases (CVD), Cancer, Diabetes, Chronic Obstructive Lung Disease (COPD), mental disorders and Injuries are main causes of death and disability due to NCDs.

Health programmes of Indian Government for the Elderly

National Programme for Health Care of Elderly (NPHCE): Government of India has launched the NPHCE in 2010-11 to address health related problems of elderly people. The programme has been initiated in 100 identified districts of 21 States during the 11th Plan period. Eight Regional Medical Institutions (Regional Geriatric Institutions) have also been selected under the programme.

The basic aim of the programme is to provide separate and specialized comprehensive health care to senior citizens at various level of State Health care, management of illness, health, manpower development for geriatric services, medical rehabilitation and therapeutic intervention and IEC (Information, Education & Communication) are some of the strategies envisaged under the programme. The important components of the programme include

- i) Establishment of 30 bedded Department of Geriatrics at 8 Regional Medical Institutions
- ii) Development of 10 bedded geriatric wards at district hospitals of 100 identified districts
- iii) Development of rehabilitation unit and provision of biweekly geriatric clinic at CHC
- iv) Provision of once weekly geriatric at PHC under 100 identified districts
- v) Provision of supportive equipments like walking sticks calipers etc. at sub centres.

The important achievements are:

- MOU has been signed with 19 States.
- Operational guidelines have been launched.
- A geriatric OPD has been inaugurated at AIIMS, New Delhi.
- A training workshop has been organized in which medical specialists and surgical specialists from 21 districts were trained

A National Programme for the Control of Cancer, Vascular Diseases and Diabetes, Health Care of Elderly (Geriatrics Care) and Mental Health have been taken up in 100 districts. Major NCD programmes launched for implementation are:

- National Cancer Control Program with an outlay of Rs. 731.52 crores.
- National Programme for Prevention and Control of Diabetes, Cardiovascular Diseases and Strokes with an outlay of Rs. 499.38 crores.
- National Mental Health Programme (district component) with an outlay of Rs. 600 Crores.
- National Programme for Health Care of the Elderly with an outlay of Rs. 288 crores.



Under this key initiative, dedicated staff will be positioned in community health care centres and district hospitals and training being given to frontline health workers as well as medical and paramedical staff at different health facilities for diagnosis and early referral an appropriate health care facilities. It is also believed that decentralization of such a comprehensive package of services (including prevention, diagnosis and early treatment) would reduce patient flow to city hospitals, reduce out-of-pocket expenses among the affected families and save lives due to timely treatment. Effort has been made to integrate and synergise all these programs at various levels.

Need for Special hospitals and old age homes for the elderly

Even though the government provides old age pension and introduced a list of health programs for the elderly it is still inadequate to meet the needs and requirements of these older citizens. When compared to the total population of the elderly in our country and the financial outlay for the senior citizens it is very meager. Also the hospitals providing services for the elderly are very few.

If the support system at home is good there arises no issue with regard to elderly in the absence of it every day becomes a nightmare for the elderly. Elders need physical assistance, food, clothing, medical, health expenses. Under the ministry of Social Welfare government should think of establishing old age homes to take care of the elderly. These old age homes shall be established in tier II and tier III cities and they shall be located near public health centre's to meet their health requirements.

To Take care of the health needs of elderly there are no exclusive geriatric wards at government hospitals. Timely attention is very much needed in the case of the older persons. Unlike ordinary patients they cannot wait for longer time for treatments. Government should so urgency in establishing separate wards in the government run hospitals. In spite of lot of old age homes run by private managements they do not accommodate the marginalized and poor senior citizens. Only affluent and rich persons can afford to stay in privately run old age homes.

Scope and Role of Social Workers

The scope for Social Workers is aplenty with the older persons. Even though government takes lot of initiatives for the welfare of the elderly the role of Social Workers are very crucial in offering services to the elderly. Geriatric Social Work or Gerontological Social Work specialization can be given special impetus so that the growing demand of taking care of the elderly can be met out by trained professional Social Workers. Special focus on using the Social Work methods such as Social Case Work and Social Group Work with the elderly will help in solving many of the problems of the older citizens. It should be made mandatory that every old age home should have at least one Social Worker. Social Workers will ensure that old age homes provide ramps at all places accessed by older persons and also they would monitor whether the services at the old age home is easily accessible. The needs of the older persons are growing day by day due to many healths related issues. Social workers can carry the information on health facilities offered by government to the senior citizens.

Conclusion

It is evident that lot more efforts are needed to uplift the status of Indian elderly. Even though there are efforts from the government aiming at taking care of the health of the elderly still it is a long way to go. Awareness has to be created among the family members and other care givers to take care of the older citizens. Old age homes should focus on maximizing the facilities and services offered to their inmates keeping them happy and healthy. It is also an alarming fact that considerable proportion of older persons in India are still working. Government, NGO's and Social Workers need to play a major role in taking care of the working and disabled elderly. Even though few hospitals are to be added with geriatric wards large country like India needs exclusive geriatric hospitals in large numbers. Thus joint effort from every quarter will put Indian elderly in a more comfortable position getting best services where ever they go.

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