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Managing the ageing: Concerns and considerations in the Indian Context

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Abstract:
The global demographic shift toward an aging population has prompted a critical public health shift from merely extending lifespan to optimizing the quality of life. As defined by the World Health Organization, healthy aging is the process of developing and maintaining the functional ability that enables well-being in older age. This comprehensive approach emphasizes that functional ability is not solely the absence of disease, but rather the capacity to meet basic needs. Achieving healthy aging requires a multidimensional framework that addresses physical, cognitive, emotional, and social health across the entire life course. By fostering environments that promote these core pillars of wellness, societies can empower older individuals to maintain their independence, enhance their quality of life, and continue participating productively in their communities. The present study tries to analyse various aspects of the ageing issue and how it can be managed by the state.

Keywords: Aging, India, Institutionalisation, Policy

Introduction

'Aging' is a biological phenomenon, the ending period in the expected lifespan of a being. Aging is one of the most significant emerging demographic phenomena in the current world. The Problems of the elderly is highly intensified due to the unprecedented speed of socioeconomic transformation, which has caused changes in living condition. The demands and problems of the elderly vary according to their age, socioeconomic standing, health, and living conditions. At the global level, aging is becoming a serious concern for policymakers. This is very particular to countries in East Asia like Japan, South Korea, China, and India. Europe is also not an exception. For example, countries like Germany and Spain are seriously trying to address the issue. In this context, Americans are a bit comfortable as the aging process in the US is at a slower rate than in most other countries. On the other hand, countries like Pakistan and Nigeria potentially seem to benefit from the demographic trends. In these cases, the countries benefit from large shares of children and youth in their populations, contributing to the workforce of the respective countries.

It is reported that the current aging of populations brings severe concerns to the government. One central area of discussion here is that there is a possibility of the shrinking proportion of working-age people in the group

15 to 64. The reduction in the workforce may bring an economic slowdown in the near future. Countries like Canada and Australia are currently facing a shortage of human resources and depend on migrant people to run the economy. It is also observed that the smaller working-age populations will have to take the burden of older dependents. This may result in stress in the state's financial management, including the enlargement of social security networks. There are also more significant demands for the re-allocation of public goods and services that Favor the seniors. One example here is the increase in pension expenditure. It is estimated that the public pension expenditures in any European state may cross 15 percent of GDP by the year 2020. In the United States of America, the government expenditure on pension is projected to be 8.5% of GDP in 2050 against 6.8% of GDP in 2010. There is also the possibility of a considerable increase in health expenditure.

Ageing scenario

In 1950, the world population aged 60 years and above was 2.05 million, i.e., 8.2% of the population, further increasing to 6.6 million. i.e., 10% of the population in 2000 (UN Report on World Population Ageing, 2015). As per the UN report 2020, the number of older persons worldwide is more than double over the next three decades. It may reach over 1.5 billion numbers by the year 2050. It is also assumed that between 2020 and 2050, all regions will see an increase in the size of the older population. Globally, the portion of the population at the age of 65 years or over is anticipated to surge from 9.3 percent in 2020 to 16.0 percent in 2050. In 2050, 82%of the world's elderly people will be in developing regions of Asia, Africa, Latin America, and the Caribbean. Only 60% of them will reside in the developed region of Europe and North America.

According to the United Nations Population Division, countries in Asia and Europe are home to the world's oldest populations. Here the old population is counted as those ages 65 and above. In this data, Japan occupies the top position in the percentage of aged at 28 percent. In terms of number, China has 166.37 million people aged 65 and above. This comes to twelve percent of China's population.

The Indian situation

In India, the informal support systems of family kinship were very strong, and so the older people were considered as the head of the family, and as a patron, they have enjoyed reverence and dignity. Industrialization and globalization confounded the traditional values in Indian society. The sociological shifts with family as a system from joint or extended family to the nuclear family have caused a radical altering of the family ethos and functions. The migration of youth to urban areas for jobs or work and participation of women in the workforce also caused the forceful marginalization of older people from their original land and house.

The usual concept and experience of the 'Generation gap' has instigated ostracism of the elderly from the family and the dwellings of the new generations, and this experience has made them doomed in the institutions or leftover with the forsaken homes. The generation gap is normally defined as the difference in values and

attitudes between one generation and another. This applies especially between young people and their parents. It is seen that history has witnessed some degree of generational differences. For instance, women in the 1920s shocked their elders by wearing short skirts and bobbed hair. But the use of the term "generation gap" came into common currency in the United States of America and Europe during the 1960s. The generation gap is described the cultural differences between the baby boomers and their parents. During this period, the differences between the two generations were exaggerated in comparison with previous periods. These differences originate from older and younger people not understanding each other mainly because of their differences in experiences, opinions, habits, and behaviour.

Table 1. Growth Elderly Population Aged 60& and above in India (Gender wise distribution)

Sl No	Year	Male (Millions)	Female (Millions)	Total (Millions)
1	1961	12.4	12.4	24.8
2	1971	15.8	16.9	32.7
3	1981	21.1	22	43.1
4	1991	27.3	29.4	56.7
5	2001	38.9	37.8	76.7
6	2011	52.8	51.1	103.9
7	2031 (Projections)	92.9	100.9	193.8

(Source: Compiled from Elderly in 2021, Report by Ministry of statistics and project implementation, Government of India)

From the table it is found that there is gradual growth of elderly population in India. Apart from the 2011 census the number of female elderly is increasing. The projections for 2021 and 2031 also shows an increasing trend in elderly female population. This calls for gender specific elderly policies also. As the elderly population in India is increasing the country should focus on the concerns of the elderly population than ever before. There should be effective measures for improving the quality of life of the elderly. The demographic picture of the elderly population in India as per the 2001 census showed that the majority of the elderly are living in rural area and rest 25 percent are in urban area, 53 percent among elderly are males and, 20 percent among elderly female are illiterate. (Central statistics office – MSPI, Government of India report (2011). In 2011census the percentage of population aged 60+ has accounted 8.5% of the total population of the country. The growth rate of population is 3% annually and this may lead to 319 million elderly in the year 2050. It was reported in Lok Sabha in 2018 that the growth rate of the 0-14 population was slowing, but rising for the older people in the country. The numbers reveal that India may lose demographic dividend and stare at a situation where a large number of populations will be dependent including old age, widowed and highly dependent

women. In India there are many state agencies working for the betterment of the life of elderly. Apart from the state initiatives there are non-governmental efforts to better the condition of the elderly.

Institutionalization

The Indian population is aging faster and it is, therefore, unrealistic to expect, in the light of the current socio-economic scenario, either the family to completely take care of the elderly or the government to subsidize the elderly care programs completely. The situation of the elderly is also becoming difficult as social compulsions and economic necessities restrain family members from taking the role of care-givers. The nuclear family system and the migration of the youth bring heavy toll on family roles, particularly with regard to the elderly. This leads to the search for other mechanisms, outside family to take care of the elderly. The result is Institutionalization of old age care. People tend to depend on institutions to take care of their elderly.

Institutionalization for the aged and elderly is a worldwide phenomenon. Many of the developed countries accepted it as a norm and people enjoy their retired life in care homes. The concept of 'Institutionalization' is becoming popular today in the Indian subcontinent also. Many societies in the subcontinent depend on these institutions for elderly care. Aged people are institutionalized due to various reasons. This includes; lack of caregivers at home, adjustment issues with family people and family burdens, deserted by family members and poor economic conditions

Once institutionalized, the elderly people need various adjustments, generally effective adaptation to the new environment. This adaptation is not easy in the old age because elders need to change their mental set up to live in a place away from home, with strangers and with less individual freedom. They have also to abide by the rules and regulations of the centre.

The Kerala Scenario

Ageing and transnational migration are two major processes of transformation in the modern world. Kerala has become the best venue for both these processes of transformation. While the state has had a history of large-scale transnational migration, which has had a far-reaching influence on the economic and social fabric of the state, the ageing of its population has been a more recent phenomenon. Rapid demographic transition, population ageing and widespread transnational migration have come together to define the larger socio-demographic context of the state. Large-scale migration has dictated the absence of the younger generation of family caregivers, whereas an intensification of ageing in Kerala has resulted in a growing need for care for older persons staying behind. Kerala stands first when comparing the number of institutions for the elderly in India. This is due to industrialization, increasing health issues, and westernization.

The institutionalization of elderly is also much visible in the state of Kerala. There are many factors contributing to the popularization of institutionalization in Kerala. The factors include migration of youth,

development of nuclear families, absence or limitations in the home environment etc. It is also observed that the health care systems in Kerala do not give focus on the elderly people for the upliftment. Even though there are many policies and recommendations for the old age people there is no proper health care system that provides health care facilities for satisfying the needs of the elderly. There are few support programs for the elderly in the health care system, such as memory clinics and other institutional or daycare system available for the elderly that would regularly monitor health constraints which help to rein such problems. A memory clinic helps to provide early intervention to memory loss that will provide better management of conditions like Alzheimer's and related Disorder's society of India. Age is considered as a risk factor for dementia and the number of people with dementia in the State is higher than most other States. These issues are to be well acknowledged by the government and policy makers in the state.

Policy initiatives

The increase in the number of the elder population had indirectly increased demand for the health care facilities, pension and other social security payments. The ancestry of Indian culture lies in the joint family system where the elderly people in the society were treated as an asset rather than a liability. During those periods the seniors play a major role in the decision making and they had enjoyed enormous wisdom. The materialistic society had not only changed the significance of the elderly people in India, but it had demolished the entire concept of the joint family system. As a part of, these changes in Indian society, the society had experienced mushrooming of intuitions for the elderly people. India had also faced weakening of family bonds, migration of the young to town and cities, acceptance of small family norms. Many families in India had started to view institutionalization as a last resort for caring for the parents.

Ageing is a natural process and every individual will experience this at some point in time. The quality of life of senior citizen is not limited to the basic needs, the quality of life is incomplete without meeting the biological medical, social, economic needs of the individual. Ageing had become a social problem and this can only be solved through innovations in the field of geriatrics. In this period of an empty nest, many changes can result in many problems. This period is often mentioned as an empty nest as the individual becomes active to passive. The term "empty nest" refers to the feeling of loneliness that most parents experience after their children leave the home to live on their own. When the children leave home, some parents may experience a deep sense of loss that makes them more prone to developing various mental and physical health conditions. Sometimes it may lead to depression, alcoholism, identity crisis and marital conflicts. Although empty nest syndrome strikes both parents, it has been found that mothers are more affected by it in comparison with father as mothers are emotionally more attached to the children and it affects even more if they are going through other significant life events.

India faces mushrooming of institutions where many people in old age are being admitted. The institution must develop different strategies to improve the quality of life of the individuals. Therefore, numerous institutions that take care of old managed by the government, voluntary organizations, and missionaries have come into existence. They ensure a large range of services such as residential care, daycare, geriatric care, medical care, recreation, and counselling to help the most vulnerable sections of society.

In response to the growing changes in age composition and faster ageing, the government of India has made many policy initiatives to help older persons. Also, there have been commitments by the government at various national and international fora to assimilate the growing number of aged in the process of development. The UN-sponsored Second World Assembly on Ageing in Madrid held in April 2002 was one of the earliest policy-level initiatives in the international field. In the case of India, besides some direct measures of protective subsidies and income transfers, the union government has also initiated a National Policy on Older Persons in January 1999. This was followed by many measures in the form of policy and legislation that extended support to the elderly in need. Income security for the aged in India is operating at two levels. First is the national public assistance scheme by the central government. Apart from this, there are welfare activities funded by states themselves. One of these activities includes old-age pension programmes for the destitute elderly. However, the nature of the schemes depends on the financial position and will of individual states.

Policy suggestions and recommendations

Old age is one of the crucial stages of human life. In this stage, individuals undergo large stress and experience many difficulties. Many old age people face rejection from the family atmosphere and also from social settings. This brings further reduction of their quality of life. Due to the social changes and economic constraints in family and society, many elderly people were forced to depend on institutions for spending their last stage of life. Institutionalization has become a regular mechanism for elderly care in India. The old age people who are living without caregivers need the help of others at some point in time. This context draws forward the importance of the need for a separate funding provision for the elderly in India.

Geriatric social work should become process-oriented rather than becoming problem-oriented. The social worker should focus on medical care, emotional support, counselling to the client, and the caregivers which are important parts of the process. The social worker should be appointed in the community rehabilitation schemes and in government and private hospitals to ensure the availability of the work process to every elderly in the society. The detailed intervention strategies that can be started by the social worker include the creation of awareness among the general population, specifically the elderly for regular medical examinations to ensure prevention and early detection of the disease.

The problems faced by the senior people in India are multi-dimensional which biological, sociological, emotional, psychological, and economic dimensions. All these dimensions of geriatrics are interrelated and this cannot be dealt with in isolation. Health care for the elderly varies from different ages and the needs of elderly people also differ according to their age. In this period of old age, medical needs become the topmost priority list as old age people wish to remain functional and maintain the quality of life that they had experienced. Social work intervention focuses on empowering the elderly population.

The government should start specialized geriatric clinics in private and government hospitals. The government should formulate health plans for maintaining uniformity in health care services. Health care services should make available at the doorsteps for elderly people who have functional limitations. It is important to make elderly people aware of nutrition and health-related issues.

Conclusion

The 2011 census reveals that the number of elderly people in India is increasing as a part of extended life expectancy and developments in the medical field. In olden time the elderly people had enjoyed dignity and respect. The emergence of modernization resulted in complete demolishing of Indian pedigree of joint family system. Despite this, the elderly population had the control over his properties and had the freedom to dispose of it. The changes began to take place in the entire system including the family system in India. Migration of youth, increase in population size, the disintegration of the family system, empowerment of women had created significant impact in the role of elderly people in the society. For a developing country like India, this demographic transition is one of the major problems faced by India today. The mushrooming of old age home which is inherited from western models is the Indian society to solve the problem of the elderly, the hard truth is that these institutions do not provide expected quality of life for the elderly. What we need at this point is elder friendly policies and programmes. The elderly should be considered as an asset to the nation and their potentials should be tapped to the maximum level possible.

The need for social work intervention is rising rapidly in the present society due to the increase in the number of elderly people. Social workers can help in fully exercising human and civil rights and equal opportunities, maintaining or regaining maximum independence, managing risks inherent in ordinary life, being able to access information and choose and control support arrangements, being free from discrimination, harassment, neglect, exploitation or abuse.

The UN Decade of Healthy Ageing (2021–2030) seeks to reduce health inequities and improve the lives of older people, their families and communities through collective action in four areas: changing how we think, feel and act towards age and ageism; developing communities in ways that foster the abilities of older people; delivering person-centred integrated care and primary health services responsive to older people; and

providing older people who need it with access to quality long-term care. These initiatives of UN can be a spring board for action for healthy aging for people across the globe.

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