

CHAPTER - 1

INTRODUCTION

1.1 Concept of Aging

Ageing is a natural and universal phenomenon. It has its own dynamics and effects which are beyond human control. Every person in this world undergoes the process of ageing. Old age is the last stage of human life span. In this stage, a constellation of social, biological and psychological changes occurs in a person's life (Richard, 1962). In human society, ageing is always understood in the context of a society. Therefore, it is considered more as a social phenomenon rather than physiological phenomenon. Socially, aging is considered as the aggregate of lived experiences of an individual. It is considered as a social reality and is one of many other socially constructed institutions.

The term 'age' means the length of time for which a person has existed and if that existence is for a long time, the society considers him as 'aged'. The aged is defined in various ways. The Indian definition included those who are sixty years or above at the time of the survey as aged. According to internationally accepted definition; an aged is one who is sixty five year of age or above. In India, however, all persons who are sixty years or above are included among the aged.

In the 4th century BC, Plato gave his views on old age. He divided the life span a person into six phases. According to him, the last two constituents of life span of person are "Old Age" (the age between 62-79 years) and "Advanced Age" (the age of 80 years or above it). However, he noted, that the last phase is fortunately attained by few persons.

The United Nations have agreed that a person may usually be considered old aged if he is above 60 years age. This is also the first international attempt to define old age.

However, **World Health Organisation (WHO)** has set 50 years as the starting of old age for its study of old age in Africa. At the same time, the **WHO** recognised that the developing world often does not define old age by years, but by assignment of new roles, loss of previous roles, or inability of a person to

actively contribute to society. In a developing country like India, aged has become a serious social issue.

Ageing is a multidimensional process, it can be measured in many ways, yet for the purpose of understanding it can be specified in three processes of ageing: - Physical, Psychological and Social. The physical ageing comprises the internal and external biological changes that occur in later part of one's body such as weakening of muscle strength, loss or weakening of visual or hearing power etc. The psychological ageing is concerned with changes in individual's personality, behaviour, cognitive capacities, attitude and perception towards the world and the self. The social ageing focuses on the changes in the roles and responsibilities of an individual which he performed previously and inability to make contribution in family and society. There are many events which an individual experience over various age categories such as retirement from their employment, death of spouse, marriage of children, old age health issues and assuming new social responsibilities etc. Thus, it can be analysed that ageing is a by-product of physical, psychological and social processes. In the changing scenario, the old age people face a lot of problems. A number of factors contribute to increasing the problems of aged, the foremost being the breaking of joint family system. Individualism, urbanization and industrialization are the other important factors, which are growing rapidly in the society. It has been proved that as the age advances, there is a corresponding decrease in brain mass and a severe reduction in number of brain cells. These age-related changes adversely affect the functional abilities of aged persons and cause their increased dependence on others. The problems of aged get more complicated when their own children don't take care of them and when they face health problems, psycho-social problems and economic problems. The situation is positively affected by the intervention of modern institutions in the lives of old age persons. The need of such institutional care is realised especially for the destitute and poor old age persons. Emergence of old age homes thus became an alternate arrangement for the care of the aged persons in this difficult situation. In India,

total 724 old age homes in 1998 and now 1281 old age homes and in Haryana there are total 25 old age homes (Directory of Help Age India). The issue of old age will turn out to be a crucial one for the society.

1.2 Trends of aged population in India

In the 21st century, ageing of the population has become an important demographic factor. The number of old age persons has steadily increased since 1948 due to the worldwide increase in life expectancy and decrease in fertility rates (World Bank, 2011). Moreover, the world population of aged persons (aged 60 years and above) had already touched the figure of 25 crores in 1950 and 48 crores in 1990. Further, the more alarming fact is that a huge number of aged persons i.e. 125 crores is estimated to be added to the existing number of old age persons worldwide by the year 2025. This will increase the population of aged persons by 146 percent (Global Statistics, 2012). In India, the number of old age persons (60 years and above) was 4.3 crores (6.29 percent of the total population) in 1981, 5.5 crores (6.2 percent of total population) in 1991, 7.7 crores (7.26 percent of total population) in 2001 and it has touched the figure of 10.3 crores (8.53 percent of total population) in 2011 (reports of Census of India 1981 to 2011). Thus, it may be seen that the ageing process is undergoing at a fast rate in India. Many factors such as increase in life expectancy due to tremendous advancement in science & technology and medical facilities and demographic transition are responsible for these basic changes in the age structure of the population. This fast growing population of old age persons need socio-economic and emotional support. Therefore, in coming years, care of this increasing population of aged is going to become a big challenge for government of India and policy makers. In India, according to census of India 2011, total dependency ratio is 652, young population (age group between 15 and 59 years) dependency ratio is 510 and old age (aged 60 years and above) dependency ratio is 142. Thus, old age dependency ratio is low for old age people as compared to young population dependency ratio. As the dependency ratio increases, the burden on the productive part of the population to nurture and maintain the upbringing of the population of economically dependent may increase. This adversely affects financial expenditures on other fields of social sector. The medical expenditure on old age persons also gets increased.

Table No.1.1.1

State wise population of the aged (60+ years) by sex and its percentage to total population -2011

S. No.	STATE/UT	Total Population of aged (approximate)			Percentage of elderly population to total population of the State /UT
		Persons	Males	Females	
1	ANDHRA PRADESH	82,78,241	39,06,328	43,71,913	9.8
2	A & N ISLANDS	25,424	14,189	11,235	6.7
3	ARUNACHAL PRADESH	63,639	33,189	30,450	4.6
4	ASSAM	20,78,544	10,54,817	10,23,727	6.7
5	BIHAR	77,07,145	41,06,593	36,00,552	7.4
6	CHANDIGARH	67,078	34,833	32,245	6.4
7	CHHATTISGARH	20,03,909	9,28,159	10,75,750	7.8
8	D & N HAVELI	13,892	6,359	7,533	4.0
9	DAMAN & DIU	11361	4873	6488	4.7
10	NCT OF DELHI	11,47,445	5,76,755	5,70,690	6.8
11	GOA	1,63,495	74,315	89,180	11.2
12	GUJARAT	47,86,559	22,45,601	25,40,958	7.9
13	HARYANA	21,93,755	10,88,621	11,05,134	8.7
14	HIMACHAL PRADESH	7,03,009	3,40,875	3,62,134	10.2
15	JAMMU & KASHMIR	9,22,656	4,82,580	4,40,076	7.4
16	JHARKHAND	23,56,678	11,81,745	11,74,933	7.1
17	KARNATAKA	57,91,032	27,47,072	30,43,960	7.7
18	KERALA	41,93,393	18,83,595	23,09,798	12.6
19	LAKSHADWEEP	5,270	2,674	2,596	8.2
20	MADHYA PRADESH	57,13,316	27,69,556	29,43,760	7.9

21	MAHARASHTRA	1,11,06,935	52,53,709	58,53,226	9.9
22	MANIPUR	1,87,694	93,137	94,557	7.0
23	MEGHALAYA	1,38,902	66,939	71,963	4.7
24	MIZORAM	68,628	34,345	34,283	7.3
25	NAGALAND	1,02,726	54,779	47,947	5.2
26	ODISHA	39,84,448	19,94,270	19,90,178	9.5
27	PUDUCHERRY	1,20,436	53,419	67,017	9.7
28	PUNJAB	28,65,817	14,43,662	14,22,155	10.3
29	RAJASTHAN	51,12,138	24,32,263	26,79,875	7.5
30	SIKKIM	40,752	22,472	18,280	6.7
31	TAMIL NADU	75,09,758	36,61,226	38,48,532	10.4
32	TRIPURA	2,89,544	1,41,920	1,47,624	7.9
33	UTTAR PRADESH	1,54,39,904	80,37,133	74,02,771	7.7
34	UTTARAKHAND	9,00,809	4,41,897	4,58,912	8.9
35	WEST BENGAL	77,42,382	38,51,314	38,91,068	8.5

Source: Census of India, 2011

The table show the State-wise population of elderly people which comprised people of age group 60 years and above. It may be seen from the above table that the state of Kerala has highest proportion of old age people to its population (12.6 percent of total population) followed by Goa (11.2 percent of total population) and Tamil Nadu (10.4 per cent). In Haryana, the proportion of elderly people is 8.7 percent. The high proportion of aged people population in states like Kerala, Goa and Tamil Nadu is due to the fact these states have better medical facilities and better lifestyle and other factors like literacy rate. The states and the union territories having least proportion of elderly population are the Union Territory of Dadra & Nagar Haveli (4.0 per cent), the state of Arunachal Pradesh (4.6 per cent) and the Union Territory of Daman & Diu and the state of Meghalaya (both 4.7 per cent).

Table No. 1.1.2
Population of persons aged 60 years & above by Sex

Census Year	Total number of person aged 60 years or above (in crores)	Number of males aged 60 years or above (in crores)	Number of females aged 60 years or above (in crores)
1961	2.46	1.23	1.23
1971	3.26	1.68	1.58
1981	4.31	2.20	2.11
1991	5.66	2.93	2.73
2001	7.65	3.77	3.88
2011	10.36	5.10	5.26

Source: Census of India 1961-2001, NSSO Survey 2004-05 and 2007-08, SRS (Sample Registration System) Statistical Report 2011

The table shows the decadal elderly population from 1961 to 2011. It shows that the size of elderly population is increasing by time. As per the census of 1961, total number of persons aged 60 years or above was 2.46 crores which increased steadily to 3.26 crores in 1971, 4.31 crores in 1981, 5.66 crores in 1991, 7.65 crores in 2001 and 10.36 crores in 2011. The growth in the population of the aged people is due to the achievement of longevity of life caused by economic well-being, better health facilities, better medicines and decrease in fertility rates. From the Table 1.1.2, it is interesting to note that upto the census of 1991, the number of males aged 60 years or above outnumbered the number of females in the corresponding age group. The trend has been reversed after 1991 after which number of females aged 60 years or above has outnumbered the number of males in the corresponding age group. This is because the higher life expectancy of females compared to male and reduction in maternal mortality rate. However, this is a concern for policy makers as a aged female is more vulnerable on all fronts than a aged male.

Trends of aged population in Haryana

Haryana is one of the fastest-growing states in India. Haryana witnessed a low rate of population growth during the first half of the twentieth century, but

currently, it is contributing to population growth of India by an annual growth rate of 2.5 percent. In 1991, the total population of Haryana was 1.6 crores and that of India was about 85 crores. Thus, it was about 2 percent of the population of India at that time. The population of Haryana in 1951 was 56 lakh. Thus, it got tripled during the period 1951–1991. During the period 1951–1971, the annual growth rate of population of Haryana was 2.85 percent that declined to 2.47 percent during 1971–1991. Though the annual growth rate of population of Haryana declined from 2.85 during the period 1951–1971 to 2.47 during 1971–1991, still this was much higher than the national annual growth rate that was 2.17 percent for the same period. This increase in population of the state is due to various factors such rapid decline in mortality rate caused by improvements in nutrition level, better health care facilities and sanitation. The number of elderly in the state of Haryana has generally followed the national trend. Haryana is also witnessing steady increase in the number of old age people over years. In Haryana, life expectancy at birth is 59.5 years for females and it is 61.5 years for males. In the matter of life expectancy at birth for males, Haryana ranks third among the major states of India after Kerala and Punjab which have life expectancy at birth at 65.9 years and 63 years respectively. The growth rate of the elderly population in Haryana is given below:

Table no.1.1.3
Population of old age people (60 years and above) in Haryana
from 1971 to 2011

Year	Total population of Elderly (in numbers)	Decadal growth in population of aged
1971	5,81,103	---
1981	8,19,027	2,37,924
1991	12,67,741	4,48,714
2001	15,84,089	3,16,348
2011	21,93,755	6,09,666

Source: Census of India of Social and Cultural tables of various years

The table shows the trends of aged population in Haryana from 1971 to 2011. The data of the table shows that the number of aged people above 60 years were around 5 lakh 81 thousand in 1971 and 8 lakh 19 thousand in 1981. The growth in aged population between 1971-1981 is two lakh thirty seven thousand approximately. In 1991 the population of aged in Haryana increased to 12 lakh, which further increased to 15 lakh in 2001 and 21 lakh in 2011. The growth in the population of aged between 1981-1991 is four lakh forty eight thousand and between 1991-2001 three lakh sixteen thousand. The aged population growth between 2001-2011 is six lakh nine thousand approximately. It is clear from the data that the aged population is increasing due to longevity of life caused by advancement in health care facilities and economic well-being.

Table no.1.1.4
Distribution of Aged population by Sex in Haryana -2011 Census

Age Group	Total Population		
	Total	Males	Females
1	2	3	4
60-64	8,44,349	4,13,958	4,30,391
65-69	5,04,439	2,55,270	2,49,169
70-74	3,74,161	1,88,304	1,85,857
75-79	1,96,217	97,692	98,525
80 and above	2,74,589	1,33,397	1,41,192
TOTAL	21,93,755	10,88,621	11,05,134

Source: O/o Director of Census Operations, Haryana

The table shows that the aged population (60 years and above) by sex in Haryana. The data of the table show that the aged population between 60-64 age groups is 8.4 lakhs in which males are 4.1 lakhs and females are 4.3 lakhs. In the age group of 65-69 the total aged population is 5.0 lakhs in which 2.5 lakhs are males and 2.4 lakhs are females. In the age group 70-74 the total aged population are 3.7 lakhs in which 1.8 lakhs are males and 1.8 lakhs are females. In the age

group of 75-79 the total aged population are 1.9 lakhs in which 97 thousands are males and 98 thousands are females. The data of the table also shows the total aged population between 80 years and above age group are 2.7 lakhs in which 1.3 lakhs are males and 1.4 lakhs are females.

It is clear from the data that the highest aged population was found in 60-64 age group and 65-69 age group. According to the Sample Registration Survey 2010-14 the life expectancy in Haryana is 68 years.

Table no.1.1.5

Distribution of Aged population by Residence in Haryana -2011 Census

Age Group	Rural Areas	Urban Areas	Total
60-64	5,73,957	2,70,392	8,44,349
65-69	3,43,427	1,61,012	5,04,439
70-74	2,60,398	1,13,763	3,74,161
75-79	1,36,964	59,253	1,96,217
80 and above	1,98,145	76,444	2,74,589
TOTAL	15,12,891	6,80,864	21,93,755

Source: O/o Director of Census Operations, Haryana

The table shows the aged population (60 years and above) by their residence in Haryana. The data of the table shows that the total aged population 60-64 years age group living in rural area are 5.7 lakhs and 2.7 lakhs are living in urban areas in this age group. In 65-69 years age group 3.4 lakhs aged living in rural areas and 1.6 lakhs in urban areas. In the age group of 70-74 years around 2.6 lakhs aged are living in rural areas and 1.1 lakhs are living in urban areas. In the age group of 75-79 years, approximately 1.3 lakhs aged living in rural areas and 59 thousands are living in urban areas. In the age group of 80 years and above approx 1.9 lakhs aged living in rural areas and 76 thousands are living in urban areas.

Table no.1.1.6

Death rate in old age 60 years and above by Sex and Residence in Haryana during 2016

Age Group	Death Rate (Per thousand)		
	Total	Males	Females
1	2	3	4
60-64	21.3	24.5	17.9
65-69	27.0	30.9	23.0
70-74	43.9	58.7	29.8
75-79	46.9	55.4	38.7
80-84	83.1	98.5	67.5
85 and above	182.3	214.0	156.0

Source: O/o Registrar General, India

The table shows the death rate per thousand of elderly aged 60 years and above categorised on gender basis in Haryana. The data of the table shows that the total death rate in 60-64 years age group is 21.3 per thousand and male death rate is 24.5 per thousand and female death rate is 17.9 per thousand. In the age group of 65-69 years the total death rate is 27.0 per thousand and male death rate is 30.9 per thousand and female death rate is 23.0 per thousand. In the age group of 70-74 years the total death rate is 43.9 per thousand and male death rate is 58.7 per thousand and female death rate is 29.8 per thousand. In the age group of 75-79 years the total death rate is 46.9 per thousand and male death rate is 55.4 per thousand and female death rate is 38.7 per thousand. In the age group of 80-84 years the total death rate is 83.1 per thousand and male death rate is 98.5 per thousand and female death rate is 67.5 per thousand. In the age group of 85 years and above the total death rate is 182.3 per thousand and male death rate is 214 per thousand and female death rate is 156 per thousand.

It is clear from the data that the death rate is high among males as compared to females. The decrease in age-specific death rate and increase in life expectancy among the old age people are particularly caused by advancement in medical facilities and improvements in public health which are crucial for prevention of

many diseases. In India, major reasons of death among old age persons including both males and females are illnesses such as cancer, heart attacks, lung infections, stroke and circulatory diseases. Though India is still combating these illnesses, nevertheless, longevity of elderly people show some of the achievements in the field of medical science.

1.3 Problems of elderly

Old age is the last stage of human life span. In India, the number of old age people is increasing due to decrease in mortality rate. Some of the old age people are in sound state of health. Some of old age people are found working even at age of 80. Still, many old age persons retire from their jobs due to suffering from various health problems. Many of them also don't get proper care from their families. The society also gets alienated from the problems of old age persons due to its materialistic nature.

In this age, the old age people faced lot of problems. At the same time, it is very difficult to make generalizations about the problems of the aged. Because the socio-economic and familial background of the old age people residing in old age home do not same. The problems of those old age people who have just stepped into the old age and those who have crossed their 80 years are not the same. The old age people from urban areas, rural areas and those from nuclear family and joint family, upper class, lower class are not always faced the same problems.

So the problems of the aged are divided in four parts:

- 1 Physical Problem
2. Economical Problem
3. Social Problem
4. Psychological Problem

1. Physical health problems

Health is the positive state of well-being in which every organ of the body and mind work properly. In a layman's language, when every organ of body work properly, the state of well-being is known as health. Health is that crucial aspect of life which is essential for a long healthy life. Health is a general condition of a

person's mind, body, spirit and free from illness, injury and pain. Good health always enables the person to live longer and work in a productive way. So that we can always considered good health is an important part of happy life. It is always noticed that healthy person is not dependent on others for routine work. But they can enjoy the every moment of life in a better way. Contrary to say that an unhealthy person finds it difficult to enjoy the life. Thus, health status affects the quality of life of human being. In old age the health status of aged persons deteriorate and old age people totally dependents on others.

2. Economic Problems

Economic factors play important role in the life of the individual. The economic status of the family also affects the well being of the old age people. Economic status is very important variable to study as it determines the living standard and lifestyle of people. In this age, the old age people are unable to engage themselves in income generating activities as they are physically and mentally not fit to earn. Their control over the finances of the family is taken away from them by their family members. The old age people who have finances and wealth, they are exploited by their family members by taking away their wealth from them. After the death of their spouse they feel helpless and dependent on their family members. In such conditions, they feel economically insecure. The feeling of economic insecurity is higher in women than men in old age. They become totally dependent on their family members to fulfil their needs. They need support not only emotionally but also financially from their family members. In India, more than 65 percent of the aged people are dependent upon others for their daily life activities and responsibilities. The aged women, who are independent, accounted for less than 20 percent, whereas men were independent to a major extent (Financial Status of Older People in India, 2011).

After increase in the life expectancy, the old age people need long term care, which may cause the financial stress on their family to increase. The most vulnerable are those aged who do not have productive assets, have no savings or income from investments and have no retirement benefits. Those aged women who worked as house wives throughout their life and has no resources or social security are the most vulnerable.

3. Psychological problems

Psychological well-being of the individual is very important aspect to study. The psychological well-being help the individual to adapt with life changes and cope up with the stressful situations .The Erik Erikson also describe this aspect in his theory. According to him, old age is a period of integrity versus despair. In this stage the person reflecting back on his life, feel guilt about their past and feel dissatisfied with life. The people also develop the feeling of despair which leads to depression and hopelessness. Those elderly who feel proud of their achievements feel a sense of integrity, satisfaction and accept the death without fear. The wise old age people are not characterized by a continuous state of ego integrity, instead they exhibit both ego integrity and despair.

4. Social Problems

The social support system enables old age persons to remain integrated within the society and also motivates them to be active members of the community. In traditional society the old age people is respected by their family members and they can participate in cultural, economical and social affairs of the family as well as the society. Now a day, due to a change in family structure, the old age people do not get proper care and attention from their family members. The main factors behind the emergence of this trend are growth of individualism in modern industrial life and the presence of materialistic thinking among the younger generation. All such factors cause greater alienation and isolation of old age persons from their families and society at large. These changes in family structure also cause a decline in value system, respect, honour, status and authority of old age people. Therefore, there is a need to focus on problems of elderly people and take appropriate and effective measures to improve their quality of life. Because the old age people are losses social roles so that they feel lonely and isolated. Their social life is also limited due to retirement from workplace, death of friends, relatives and spouse. Their weak health also restricts them to participate in social events. The negligent and indifferent attitude of the family members also creates more problems for elderly. Therefore, it is very important to ensure participation of elderly people in social activities and their involvement in decision making by family members.

1.4 Programme and Policies for the Aged

The emergence of various problems of old age people is a modern phenomenon. The old age people did not face such problems in ancient and medieval times because their number was small and the joint family system provided social security to them. However, in modern times, the population of old age people is emerging like a problem and proper attention is required to prevent it from becoming critical. Though a few studies show that family and relatives still play an important role in providing social and economic security to the old age persons, still, the majority of them need health care, economic and social support. Developing a comprehensive policy for elderly is the most urgent need for taking care of them in a comprehensive and coordinated manner. The task of implementing the policy is a national responsibility, requiring the combined efforts of the government, NGOs and other social units. It should be made mandatory for all participating ministries, departments, state governments and NGOs to promote and participate in the programmes concerned with the welfare of older persons. The government has launched many schemes and policies over the years for old age people. These schemes and policies are instrumental in promoting the health, welfare and independence of old age persons in the country. Some of these schemes and policies are as under: To promote the health and well-being of old age persons in the country, the central government in 1999 launched the National Policy for Older Persons. The main aim of this policy is to motivate individuals to make provisions and plan for their own as well as their spouse's old age. It also endeavours to motivate families to take care of their older members. The policy also motivates and enables voluntary and non-governmental organizations (NGOs) to provide protection and care to vulnerable old age persons and to supplement the care provided to older members by their families. The policy also enumerates facilities of research, health care, creation of awareness and training to geriatric caregivers.

INTEGRATED PROGRAMME FOR OLDER PERSONS (IPOP)

This scheme is a Central Sector Scheme and is being implemented by the Ministry of Social Justice and Empowerment since 1992. The main objective of the scheme is to improve the quality of life of old age people through provisions

of basic services like shelter, food, medical care and entertainment facility etc. This Scheme was revised in 01.04.2008 and 01.04.2015. In the revised scheme several innovative projects were added. The following projects come under the IPOP Scheme:

- (i) Maintenance of Old Age Homes;
- (ii) Mobile Medicare Units;
- (iii) Maintenance of Respite Care Homes;
- (iv) Running of Multi Service Centres for Old Age Persons;
- (v) Multi Facility Care Centre for Old Age Widows;
- (vi) Day Care Centre for taking Care of Old Persons with Dementia;
- (vii) Regional Resource and Training Centres;
- (viii) Physiotherapy Clinics;
- (ix) Programme for Sensitization of Schools/College Students;
- (x) Helplines and Counselling for Old Age Persons;
- (xi) Volunteers Bureau for Old Age Persons;
- (xii) Awareness Projects for Old Age Persons;
- (xiii) Formation of Self Help Groups (SHGs)/Vridha Sanghas/Senior Citizen Associations;

INTERNATIONAL DAY FOR OLDER PERSONS (IDOP) AND NATIONAL AWARDS FOR OLDER PERSONS: VAYOSHRESHTHA SAMMAN

The International Day for Older Persons (IDOP) is observed by the Ministry of Social Justice and Empowerment on every year on the 1st October.

On this day the Ministry organises a series of programmes and events dedicated to the old age persons. This day is also observed to recognise the contribution of older persons to the society. The ministry has also launched a new Scheme of National Awards for Older Persons to recognize the contribution of older persons and other related institutions towards welfare of the elderly. National Awards are conferred on eminent older persons and Institutions working in any part of the

country to recognise their contribution towards the cause of old age people in functions organised at Vigyan Bhawan, New Delhi. The Award in each category carries a Citation, a Memento and in some of the categories also Cash Award. The Ministry of Social Justice and Empowerment in collaboration reputed non-government organisations also organises an Inter- generational Walkathon at India Gate Lawns, Rajpath, New Delhi.

THE MAINTENANCE AND WELFARE OF PARENTS AND SENIOR CITIZENS ACT, 2007

The Maintenance and Welfare of Parents and Senior Citizens Act, 2007 was enacted in 2007. The main objective of this act is to ensure welfare and need based maintenance for old age persons and parents. Except Jammu and Kashmir and Himachal Pradesh, all the States and Union Territories have notified the Act so far. The states of Jammu and Kashmir and Himachal Pradesh have their own Acts for the welfare of Parents and older persons.

The Act includes following provisions:

- (i) Obligatory maintenance of parents and older persons by their children/ relatives. This provision is justifiable through Tribunals.
- (ii) In case of negligence by relatives, the provision of revocation of transfer of property by older persons.
- (iii) Penal provision for desertion of older persons;
- (iv) Provision for establishment of Old Age Homes for the impoverished elderly;
- (v) Provision for protection of life and property of old age people;
- (vi) Provision for medical facilities for older persons.

NATIONAL COUNCIL FOR OLDER PERSONS (NCOP)/ NATIONAL COUNCIL OF SENIOR CITIZENS (NCSC)

The National Council for Older Persons (NCOP) was constituted in 1999. The Minister for Social Justice and Empowerment is chairman of this council and oversees its functioning. The main objective of the council is to advise the Government of India in the formulation and execution of various programmes and policies for senior citizens.

In 2012, the National Council for Older Persons (NCOP) was reconstituted and renamed as National Council for Senior Citizens (NCSRC) to provide the council a definite structure and for regional balancing. The NCSRC advises Central and State Governments on all the matters related to welfare of older persons to enhance their quality of life.

NATIONAL PROGRAMME FOR THE HEALTH CARE OF THE ELDERLY

This programme provides preventive, curative and rehabilitative services to the senior citizens at various level of health care delivery system. This programme also focuses on referral system, development of specialized man power and promotion of research in the field of old age related diseases. The major components of the programme are given below:

- i. Provisions for establishment of geriatric department in all the already existing Regional Geriatrics Centres;
- ii. Strengthening healthcare facilities for older persons.
- iii. Regional Institutions will provide technical support to geriatric units at district hospitals and the district hospitals will further oversee and coordinate the activities of CHC, PHC and sub-centers.

1.5 Government Organizations related to welfare of aged

1. MINISTRY OF SOCIAL JUSTICE AND EMPOWERMENT

The Ministry of Social Justice and Empowerment (MSJE) is implementing Integrated programme for Older Persons (IPOP) since 1992. This is a Central Sector Scheme and aims at improvement of the quality of life of older persons through provisions of basic facilities such as food, shelter, health care and entertainment. The central government provides financial assistance up to 90 to 95 percent (95 percent for North-eastern states, Sikkim and Jammu and Kashmir and 90 percent for remaining states) to Panchayati Raj Institutions, Non-Governmental/Voluntary Organisations etc. for maintenance of the institutions established for welfare of older persons such as Old Age Homes, Respite Care Homes, Day care centres etc.

2. MINISTRY OF RURAL DEVELOPMENT

The Ministry of Rural Development provides old age pension under Indira Gandhi Old Age Pension Scheme (IGNOAPS) which come under the National Social Assistance Programme (NSAP). Under the Indira Gandhi Old Age Pension Scheme central government provide assistance of rupees two hundred per month to older persons (aged between 60 and 79 years) and rupees five hundred per month to the elderly aged 80 years and above and belonging to below poverty line (BPL).

3. MINISTRY OF HEALTH & FAMILY WELFARE

The Ministry of Health and Family Welfare provides separate queues for older persons in government hospitals. The Geriatric unit is established in several government hospitals. The Ministry also implemented the National Programme for the Health Care for the Elderly (NPHCE) from the year 2010-11. The main objective of this programme is to provide preventive, curative and rehabilitative services to the elderly persons at various level of health care delivery system. The main components of this programme are given below:

Major Components

- i.** To establish geriatric department in all the existing 8 Regional Geriatrics Centres
- ii.** Strengthening healthcare facilities for elderly at various levels of 100 identified districts in 21 States of the country.
- iii.** Regional Institutions to provide technical support to geriatric units at district hospitals whereas district hospitals will supervise and coordinate the activities down below at CHC, PHC and sub-centers.

Pradhan Mantri Jan Arogya Yojana (PMJAY): In September, 2018, the Ministry of Health and Family Welfare, launched the Ayushman Bharat or Pradhan Mantri Jan Arogya Yojana (PMJAY) to provide coverage upto Rupees five lakh per family per year for secondary and tertiary treatment to over ten crore poor families (approximately 50 crore persons). With the launch of the PMJAY, RSBY and SCHIS will be subsumed under it. All enrolled beneficiary families of RSBY and SCHIS are entitled for benefits under PMJAY.

4. MINISTRY OF FINANCE

A. Health Insurances

Regarding health insurance for senior citizens, the Insurance Regulatory Development Authority (IRDA) issued some instructions in 2009 to CEOs of all General Health Insurance Companies. The instructions include:

- i. Senior citizen may be allowed to enrol in health insurance scheme till the age of 65 years,
- ii. Reasons to be recorded for
- iii. If any company denies any proposals etc. on all health insurance products serving the needs of older persons, reasons thereof shall be recorded.

B. Pradhan Mantri Vaya Vandana Yojana (PMVVY)

To provide social security to senior citizens and to protect them against any future fall in their interest income due to market fluctuations, the Ministry of Finance has launched Pradhan Mantri Vaya Vandana Yojana (PMVVY) for older persons (aged 60 years and above). Life Insurance Corporation of India (LIC) is the implementing agency of the scheme. The scheme has provision of an assured return of 8% per annum payable monthly for 10 years. The Government of India will bear the cost of differential return in the form of subsidy to LIC. In pursuance to Budget Announcement 2018- 19, Cabinet at its Meeting held on 2nd May, 2018 has approved the extension of Pradhan Mantri Yaya Vandana Yojana up to 31st March 2020 and limit of maximum purchase price of Rs. 7.5 lakh per family under the scheme has also been enhanced to Rs. 15 lakh per older person. A total of number of 2,82,155 subscribers consisting corpus of Rs. 17,704.65 crore were covered under PMVVY till 30.06.2018.

C. Senior Citizen Health Insurance Scheme (SCHIS): This Scheme, being implemented since 2016, provides insurance cover to senior citizens as a top-up over the existing RSBY Scheme. This Scheme provides an additional annual coverage of Rs. 30,000/- per senior citizen in the eligible RSBY beneficiary family. SCHIS provides a health insurance cover of Rs. 30,000/- which is available to senior citizens, in additional to the coverage of Rs. 30,000/- under RSBY. If in any RSBY enrolled family, there is more than one senior citizen,

then the additional cover will be in multiple of Rs. 30,000/- per senior citizen. 211 Treatment packages are covered under SCHIS, in addition to 1516 packages under RSBY. Currently, 08 States, namely Himachal Pradesh, Gujarat, Karnataka, Kerala, Meghalaya, Nagaland, Tripura and West Bengal are implementing SCHIS. Around 18 lakh families having senior citizen (s) are covered under SCHIS as per available records.

5. MINISTRY OF HOME AFFAIRS

Under the provisions of “Maintenance and Welfare of Parents and Senior Citizens Act, 2007” the state Governments are to provide a comprehensive Action Plan for security of life and property of old age people. Detailed instructions have also been issued by the Ministry of Home Affairs to all the State Government/Union Territories, for prevention, early identification and investigation of crimes against old age people. All the States/Union Territories have been advised to take initiative to ensure safety and security of old age people. The ministry also advised to eliminate all forms of abuse and violence with old age persons. The state and central govt sensitizes the police personnel about safety and security of old age persons

6. MINISTRY OF RAILWAYS

The following facilities are provided to old age people by the Ministry of Railways:

- i. Provisions of separate ticket counters for older persons aged 60 years and above at various Passenger Reservation System (PRS) centres if the average demand is more than 120 tickets;
- ii. Provision of lower berth to senior citizens;
- iii. concessions upto 40-50 percent in basic rail fares ;
- iv. Provisions of wheel chairs at stations for elderly passengers.

7. MINISTRY OF CIVIL AVIATION

The Ministry of Civil Aviation through its agency Air India provides 50 percent concession on air fare for old age people.

8. MINISTRY OF WOMEN AND CHILD DEVELOPMENT

- i. Home for Widows:** The Ministry of Women and Child Development has constructed a Home for Widows at Sunrakh Bangar, Vrindavan, District Mathura, Uttar Pradesh, with a capacity of 1000 widows to provide them safe and secure place to stay, health services, nutritious food, legal and counselling services. The new home for widows named as Krishna Kutir is constructed on 1.424 hectare of land and consists ground plus three floors. The design of the Home is old age friendly with facilities such as ramps, lifts, and adequate supply of water, electricity, and other facilities to meet the requirements of specially challenged old age persons. The Home is fully funded by Central Government. The Home was inaugurated on 31.8.2018. The Home is operational w.e.f. 01.09.2018 and managed by Govt. of Uttar Pradesh.

9. MINISTRY OF AYUSH

Medical facilities for Senior Citizens: Ministry of AYUSH has been providing the following facilities to senior citizens:

- i.** Free consultation and yoga therapy under Yoga and Naturopathy.
- ii.** OPDs are being provided in various Government Hospital at Delhi, Haryana, Tripura, Kerala, Madhya Pradesh, Andhra Pradesh and Jharkhand.
- iii.** Free Yoga training at 50 Yoga Parks are being run through NGOs in various states of the country.
- iv.** In addition, other programmes such as Health Promotion Programme, Yoga Therapy Programmes, Individual Yoga Therapy Sessions, Weekend Yoga Training Programmes, Monthly Clinical Yoga Therapy Workshop are also being imparted

1.6 Govt schemes and Programmes for old age people in Haryana

The Haryana government also launched various schemes and programmes for the welfare of the aged. Some of them have been discussed below:

1. 50% BUS TRAVEL CONCESSION FOR SENIOR CITIZENS

The state govt. provides 50 percent concession for senior citizens aged 60 years or above. This scheme was started in 2008-09. This concession is

provided in Haryana Roadways buses within state.

2. FREE SPECTACLES FOR BPL SENIOR CITIZENS

The Haryana government also provides free of cost spectacles to the senior citizens aged 60 years or above belonging to BPL families. This scheme was started in 2008-09. The cost rate of per person is Rs. 200.

3. OLD AGE SAMMAN ALLOWANCE SCHEME

This scheme was started in 01-11-2018. The benefits of this scheme are provided to the senior citizens of Haryana state in the age group of 60 years and above. The rate of allowance under this scheme is Rs. 2000 per month. The eligibility criteria for this scheme is given below

Eligibility Criteria:

- i.) He/she should be aged 60 years or above;
- ii.) He/she should be domicile and resident of Haryana;
- iii.) His/her annual income from all sources including income of his/her spouse shall not exceed Rupees 2,00,000.

4. STATE AWARD FOR OLDER PERSONS

The Government of Haryana has started a scheme of “State Award for Older Persons” in 2008-09. The main aim of this award is to motivate the old age people and honour them. This programme is organized every year on the occasion of international day of the elderly.

5. SETTING UP OF SENIOR CITIZENS VOLUNTARY SERVICE ASSOCIATION/NETWORK

Senior Citizen Voluntary Service Association/Network was started by the Haryana government in 2008-09. In this programme, the government give the grants-in-aid to the association related o old age people. In this programme, the government award the association for their outstanding performance in the area of old age.

6. ESTABLISHMENT OF SENIOR CITIZENS CLUB IN ALL DISTRICT URBAN ESTATES OF HARYANA

The government of Haryana started a scheme for establishment of Senior Citizen Club in all Districts Urban Estates. The programme was started in the year 2008-

09. In this scheme, the Buildings will be constructed by the Haryana Urban Development Authority and the govt sanctioned grant-aids to the registered societies.

1.7 Voluntary organizations related to welfare of aged

Since the government alone cannot fulfil all the needs of the elderly, the voluntary organisations play an important role in providing welfare services to older persons. The voluntary organisations include Non-Governmental Organizations (NGOs) and private entities. The Non-Governmental Organizations (NGOs) act like a link between the government and the beneficiaries. They provide user friendly and affordable services to meet the requirements of elderly through institutional mechanism. However, in India, this sector is providing its services to only a small proportion of the elderly population which is capable of paying for the facilities provided to them. Many non -governmental organisations run Old Age Homes and Day Care Centers throughout the country where various services are provided to old age persons at specified charge on monthly basis. The Government of India is trying to promote the NGO sector on broad basis. Older persons are also being encouraged to organize themselves so that they can provide services to the fellow older persons. The following voluntary organizations work for the old age people.

1. Help Age India

Help Age India is a non-governmental organisation in India. The organization was established in 1978. The main aim of this organization is to improve the quality of life of older persons.

Approaches

Help Age India provides following services to the old age persons :

- Elderly rights - Senior Citizens Associations (SCAs), Health Insurance, Ending Isolation, Reverse Mortgage, Elder Abuse, Union Budget Allocation, Parents Maintenance Act etc.
- Eldercare - Shelters, Social Protection, Healthcare, Mitigation, Disaster, Specialized Care

- Supporters - Trusts & Foundations, Corporates & Business houses, Individual Volunteering, , Bi-Lateral & Multi-Lateral Funders

Founders

Some of Help Age's big programs are financed by European Union, Department for International Development (United Kingdom), Disasters Emergency Committee (United Kingdom), Canadian International Development Agency (CIDA), Japan Foundation, United States Agency for International Development, HelpAge International and Cordaid.

Programmes

The following programme run by the help age India for old age people

- **Mobile Medical Units (MMU):** in mobile medical units, the mobile vans provide health care services to the old age people at doorstep. The organization is implementing this programme in 1085 community locations in 20 states of India. This program is the Asia's largest Mobile Medical Program for old age.
- **Cataract Surgeries:** Help Age India conduct free cataract surgeries camp for old age people annually. These surgeries help the old age people to work independently.
- **Cancer and Palliative Care:** Help Age India also provides treatment and rehabilitation services to the old age people suffering from Cancer.
- **Agecare/ Physiocare centres:** The help age India has also established physiotherapy centres to provide physiotherapy services to the old age people.
- **Support a Gran:** in this programme, self help groups of older persons are formed by the organization. These groups help the old age people to fulfil basic needs like food and clothing. The organization has launched this programme in 20 states of India.
- **Elder Help lines:** Help Age India's Elder Helplines operate in 20 state of India. It helps to provide various information related to old age like old age problem, emergency response, old age schemes and legal queries. It

also helps to linkage with the government, police and referral rescue and relief services.

- **Old Age Homes/Day Care Centres:** The organisation also supported the old age home to work in a better way for destitute and sick old age people.
- **Disaster Relief and Rehabilitation:** The organization also works for the rehabilitation of old age people affected in the disaster and flood.
- **Livelihood programs:** In this programme the self help group of old age people are formed. These groups start the commercial enterprises and earn some money. This programme makes the old age people financially independent.
- **Working with the Youth: Student Action for Value Education (SAVE)** – This programme is started in school and college. The aim of this programme is to involve the youth like college students and young professionals and to engage them with old age people to solve the problem of loneliness.
- **Working with Governments: for old age persons friendly policies and laws** –The organization also helps the govt organization to formulate the policies and programmes relate to old age.
- **Working with Senior Citizen Associations: for older persons -** HelpAge India also work with the senior citizens organization to address their needs and problems. It also organizes regular health checkups camps, counselling services etc.

2. Agewell Foundation

Agewell foundation, India is a non govt. organization for old age people. It was established in 1999. This foundation helps the old age people by a network of volunteers across the country. The following services provided by the foundation for old age people:

- **Helpline & Redressal Services:** Agewell has provided the Helpline service to the old age people in Delhi. The foundation also provides the counselling to the old age people.

- **Healthcare Equipment Distribution and holistic health care:** The foundation also distributes the Wheelchairs, Diapers and other health care equipments, for destitute old age people in Delhi. It also aware the old age people about health issues. It also established the trauma centre for old age people.
- **Distribution of Monthly Food Packets:** The foundation also distributes the food packets in the slum areas to destitute elderly.
- **Healthcare Training of Older Persons:** It also organizes the training programme for the family members and caregivers of the old age people.
- **Inbound Help Line Services:** It also provide the inbound help line services like Situation call supports, Emergency call support, Trauma call support, Abuse call support etc to the old age people.
- **Outbound Helpline Services :** It also provide the outbound services for old age people like Proactive information dissemination, Senior citizen camps / programs, Targeted phone campaigns in selective areas, Para-medical services, Member profiling & market research, Database ratification, apparatus and medicines, Information on specialized clinical equipment, Periodic medicinal update to patients, Financial services and Para-legal services etc.
- **Training Programs:** it also organized training programme for professionals and caregivers and empowerment & Skill Development training programme for old age people.
- **Survey / Research :** The foundation also conduct research and survey on old age people needs , problems, rights and linkage adolescents and older persons.

1.8 Emergence of Old age Homes

There is a long history of old age institutions in India. But according to Rajan, Mishra and Sarma 1999, it is believed that the first old age home was started in 18th century. In 1983, the 'Bangalore friends-in-need society' established the first old age home in Bangalore. (Goel and Gupta 2008). Old age home is

considered as an alternative shelter for the old aged people where they can share their feelings and life experiences with others as the old age institutions meet the caring needs of aged people. Thus, the family can be freer to fulfil the day to day caring needs the aged; its traditional role as a primary group. At present, the institution of old age homes has become necessity as they provide older persons the liberty to live as they want and that too without being a burden on their children. But these old age homes should be taken only as a secondary option. There are also elderly who don't get married throughout their lives or remain childless. The old age homes are of primary importance for such elderly as they have no one to take care of them in old age. Therefore, under these circumstances, it becomes necessary to provide alternatives support to those old age persons who are homeless or have been abandoned or are living alone or have no surviving children.

Although institutional care for the destitute elderly has always existed in India, but it especially as an alternative living arrangement is a recent concept in our Indian social setting. In India family is idealized in terms of social, emotional, psychological and economic support, however, reality tends to vary from this perception. Thus, there is need for readily available, affordable and good quality of care and support for the increasing numbers of old age persons. For better understanding of the concept of Old age homes, life pattern of old age persons five to six decades may be analysed. In the past, the old age people were taken care of by their families and there existed joint family or extended family system. In this family system, the older persons alongwith their children, sisters, brothers, uncles and aunts lived in nearby houses. These living settlements were situated mostly in villages or in small towns. They lived together and helped each other and enjoyed and mourned the events of their lives together. In this system, the old age persons lead a happy life usually without any tension as they always had someone to take care of them. Whenever there were some health problems to the old age persons, all the family members were ready to provide care, personal assistance and medical facilities to them. In such a system, the elderly seldom felt lonely.

However, at present the situation has changed a lot and the joint family system is disappearing from the society at a rapid rate and is being displaced by nuclear family system. There are many reasons to blame for these changes in society which are reflected in life pattern of old age persons and the whole family set up. The elderly persons have become dependent, partially or totally. The main factors for the disintegration of joint family system are modern phenomena like globalisation, industrialisation and migration of family members as well as relatives from their birthplace to towns or cities in search of better livelihood opportunities. While the younger generation face no difficulty in migration from their place of birth and in adjusting themselves to new places and new ways of life, the old age persons find it difficult to adapt to new environments. However, they still compromise for the sake of their children and thus, the stage has been setup for new life pattern for old age people.

Conclusion :

The number of the elderly is being increasing in the present time and also as the magnitude and the frequency of the increase is at a rapid level, their demands a prime need from the part of professionals in the geriatric field to act on the varied difficulties of the elderly population. Traditionally the aged was the responsibility of the family. But with changes of the social situations and also with the effects of the modernization and westernization, family loses its importance as primary source of care giving to the elderly. This is now a joint responsibility by the family, community and the government to take care of the needs of the elderly and to support them in their life.