The problem of Healthcare for the aging population in India

Mana Sharma, Dr. Rama Srivastava
Masters of Social Work
Department of Social Work
*AMITY INSTITUTE OF SOCIAL SCIENCES, NOIDA*

I.   INTRODUCTION

Aging is an inevitable part of the human lifecycle, bringing about various physical, cognitive, economic, and social changes. As individuals enter old age, typically marked around the age of 60, they may experience increased fragility and dependence, transitioning from active employment to retirement. In India, a densely populated and developing country, catering to the needs of its elderly population poses significant challenges. According to the 2011 Population Census, India is home to around 104 million individuals aged 60 and above. This demographic segment has been steadily growing and, by 2022, had reached approximately 149 million, accounting for about 10.5% of the total population.

Elderly population can be a "Boon or a Bane" to individuals themselves, families, societies and even the whole economy of a country. Senior citizens can contribute a wealth of knowledge, experience, and wisdom to their communities, often serving as mentors and role models for younger generations. However, advancing age can also bring about unique challenges, including health concerns, financial issues, and social isolation. The biggest factor that can turn a boon to bane is **"HEALTH".**

A healthier and active Elderly can be a boon as
▪   They are less prone to attracting chronic diseases.
▪   Reduced dependency on others.
▪   Continued contribution of their, skills, knowledge, experience to the society.
▪   Economic Productivity. Etc.
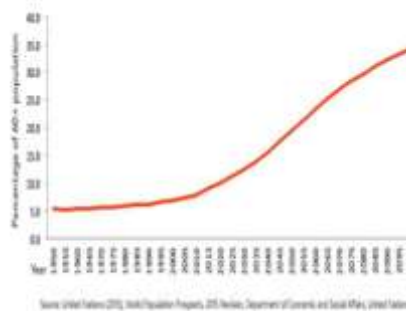
The healthcare needs of India's elderly population are diverse, ranging from preventive care to managing chronic conditions and accessing specialized geriatric services. While advancements in medical technology have improved healthcare delivery, disparities in access and utilization persist, particularly among socio-economic groups. Among the educated class, higher education levels often correlate with better health awareness and utilization of healthcare services. Despite this, financial barriers and cultural attitudes towards aging and healthcare can still hinder access to medical care. Understanding healthcare utilization among the educated class is vital for developing targeted interventions to improve access and outcomes for all elderly individuals in India, addressing barriers to healthcare utilization and ensuring equitable access to quality care.

The process of population aging has wide-ranging implications, impacting various sectors including labor, finance, and healthcare. With increased healthcare expenses for older individuals, addressing the needs of the elderly population presents challenges but also opportunities for growth within the senior care sector, currently valued at approximately USD 7 billion (Rs. 57,881 crore).In efforts to gain a comprehensive understanding of the elderly and their needs,

numerous definitions and concepts have surfaced in recent times. Nevertheless, there is a pressing requirement to formulate a conceptual framework derived from a thorough literature review and insights from both national and international experiences. This framework aims to provide a comprehensive approach to addressing the diverse challenges faced by the elderly, encompassing issues such as functional mobility and capacities while avoiding limitations.

Objective
1. To assess the current status of healthcare services available for the elderly population in India.
2. Study the awareness and experience of middle class educated family, to find out the most accurate means.
3. To determine factors required for wellbeing of senior citizens. And is finace the only factor that is involved in the upliftment of the healthcare and well being of the seniors.
4. To identify the key healthcare ineeds and challenges faced by senior citizens in India.
5. To acess the effectiveness of existing healthcare policies and programs targeting the elderly population.
6. To examine the accessibility and affordability of healthcare facilities for senior citizens.
7. To explore the impact of socio-cultural factors on healthcare

Significance of study
Studying healthcare for the elderly in India is crucial for several reasons. Firstly, with the rapidly growing population of elderly individuals, understanding their healthcare needs is essential for ensuring their well-being. Secondly, elderly individuals often require specialized medical care due to unique health challenges, emphasizing the need for tailored healthcare services. Additionally, such studies help identify gaps in existing healthcare policies, enabling the development of targeted interventions. Moreover, improving healthcare for the elderly promotes healthy aging and reduces the burden of age-related diseases, contributing to societal well-being. In summary, research on healthcare for the elderly in India is instrumental in shaping policies, enhancing healthcare delivery, and improving the health outcomes and quality of life of senior citizens.

Research Methodology
The research methodology for this study on the healthcare of educated elderly individuals in

East Delhi, India, employs a purposive sampling method to ensure a representative sample based on specific criteria including age, educational background, and accessibility to healthcare services. With a sample size of 70 educated senior citizens, data collection primarily involves quantitative methods through structured surveys administered electronically. Before participation, detailed information about the study's objectives and ethical considerations will be provided, and informed consent emphasizing confidentiality and anonymity will be obtained from all participants. This methodology allows for a comprehensive exploration of the healthcare needs and experiences of the targeted population, facilitating the identification of gaps in healthcare delivery.

Data analysis will involve rigorous processes including data cleaning, descriptive statistics to summarize characteristics and utilization patterns, and inferential statistics such as regression analysis and chi-square tests to examine associations between variables. Subgroup analysis will enable comparisons across demographic groups, while thematic analysis of qualitative data will uncover recurring themes in participants' narratives. By adhering to ethical guidelines and ensuring participant protection, this study aims to provide valuable insights into the healthcare needs of educated elderly individuals in East Delhi, ultimately informing the development of targeted interventions and policies to enhance healthcare delivery and outcomes for this vulnerable population segment.

Demographic Profile and Aging Population in India
The population of the world is aging rapidly with an imbalanced proportional increase in the older individuals in comparison to the Youth. People are now living a longer life in comparison. The global life expectancy has reached to 76.4 years for women and 70.8 years for men [1] This demographic shift is the accumulation of factors such as increased life expectancy and declined birth rates, all over the World including India. As per the WHO[2] report the world's population of people aged 60 years and older will double from 1.2 billion in 2020 to 2.1 billion by 2050 and persons aged 80

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[1] United Nations Population Division

[2] World Health Organization. (2022, October 1). Ageing and health. World Health Organization. https://www.who.int/news-room/fact-sheets/detail/ageing-and-health
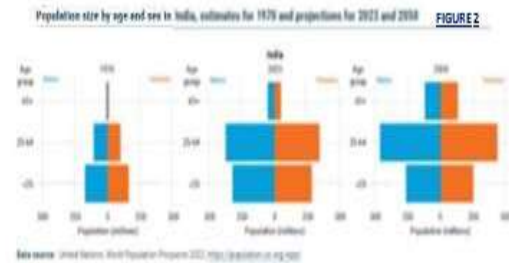
years or older is expected to triple between 2020 and 2050 to reach 426 million. Further WHO explained that by the year 2050, 2/3rd of the global population residing in the low-middle income countries will be 60 years or above.
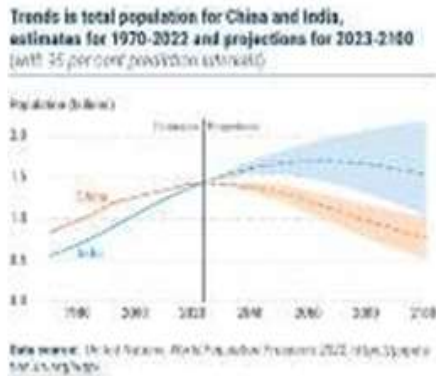
For the first time since the UN commenced tracking global population data in 1950, China has been displaced from its position as the most populous country. April 2023, marked a monumental demographic change in recorded history, UN population estimated claimed that India has surpassed China in the terms of population and has entailed the title of the "Most Populous Country of the world".[1] It is projected that India's population has reached 1,425,775,850 individuals, equaling and subsequently exceeding the population of mainland China (figure 1)[2]

India's population is highly certain to grow contionously for a serval decades. On the contrary to which China's population has attained is peak and now experiencing a downfall since 2022[3]. In 1970, India exhibited youthful population structures, evident in the pyramid-shaped age and gender distributions. During this period, themajority of the population in both nations, around 60%, consisted of children and youth under

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[1] United Nations Department of Economic and Social Affairs. (n.d.). India overtakes China as the world's most populous country. UN DESA Policy Brief No. 153.

[2] United Nations, Department of Economic and Social Affairs, Population Division (2022). World Population Prospects 2022:Summary of Results. UN DESA/POP/2022/TR/NO. 3.

[3] United Nations. (2022). World population prospects. UN; United Nations. https://population.un.org/wpp/

the age of 25, while individuals aged 65 and above constituted less than 4%.

The process of population ageing is an unavoidable outcome of demographic transition. India is observing a notable shift towards older age groups populations.

From 2023 to 2050, the elderly population aged 65 and above is projected to almost increase more than double in India. This demographic shift presents considerable challenges for the healthcare and social insurance systems in India.
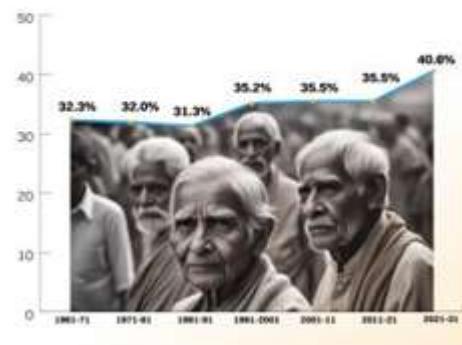
UNFPA (United Nations Population Fund) along with the International Institute for Population Sciences (IIPS) has recently published an age report for India- **"The Indian Ageing Report 2023" (IAR)**. This report provides for a detailed insights to the "Elderly care in India". The document offers a thorough examination of the living standards and well being of the senior citizens in India by drawing upon the latest information from various authentic sources, these sources includes Longitudinal Ageing Survey in India (LASI) conducted in 2017-18, data from the Census of India, Population Projections released by the Indian Government spanning from 2011 to 2036, and insights from the United Nations Department of Economic and Social Affairs' World Population Prospects 2022.

The IAR report underscores the significant growth of India's elderly population, projected to

double by 2050, comprising 20.8% of the total population. This demographic shift poses challenges, including the potential surpassing of the elderly population over children by 2046, along with a decline in the working-age population. Notably, over 40% of older individuals belong or will belong to the lowest wealth quintile, with approximately 18.7% lacking any income source. This highlights the potential financial constraints faced by individuals across socio-economic classes, impacting their ability to afford and access healthcare services, thus affecting their lifestyle, quality of life, and healthcare utilization.
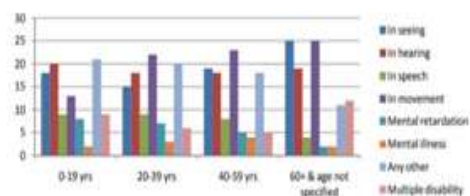
Disabled Elderly in India
Disability among the elderly in India represents a significant public health issue, posing multifaceted challenges to individuals, families, and society as a whole. With the aging population, there is a projected increase in the prevalence of disabilities among older adults, necessitating a proactive approach to address their needs. Common disabilities observed among the elderly in India encompass a range of physical, sensory, cognitive, and mental health impairments, including mobility limitations, visual and hearing impairments, dementia, and mental health disorders.

Various factors contribute to the heightened prevalence of disability among the elderly in India. These encompass barriers to accessing healthcare services, particularly in rural areas, limited awareness and utilization of assistive devices and rehabilitation services, economic disparities, substandard living conditions, and societal attitudes that perpetuate stigma and discrimination against individuals with disabilities.

The consequences of disability extend beyond physical limitations to impact social participation, economic security, and overall well-being among the elderly population. Those living with disabilities often encounter challenges related to social inclusion, employment opportunities, and access to essential services, further exacerbating their vulnerability and marginalization.

Effectively addressing disability among the elderly requires a comprehensive approach, integrating healthcare, social support, and policy interventions. This includes improving access to healthcare, promoting preventive measures, expanding rehabilitation services and assistive technologies, implementing inclusive policies, and fostering community engagement. Empowering elderly individuals with disabilities to participate in decision-making processes is crucial for upholding their autonomy and dignity. By adopting such a holistic approach, India can create a more inclusive and equitable society that respects the rights of all individuals, regardless of age or ability.

According to the most recent Census data in India, a substantial proportion of individuals with disabilities are elderly, representing 21% of the total disabled population nationwide. The data highlights a gender discrepancy, with 18% of disabled males falling into the elderly category compared to 23% of disabled females. Notably, among the elderly disabled population, mobility-related issues were prevalent, affecting 25% of individuals, while the same percentage reported visual impairments. Additionally, hearing impairments were significant, impacting 12% of this demographic. Moreover, 12% of elderly disabled individuals experienced multiple disabilities, underscoring the complex and diverse challenges they encounter on a daily basis.

Holistic understating of factors affecting the healthcare of elderly
Problems of Aging
In contemporary society, ageing is often perceived through a lens of decline and diminished value, contrasting traditional views that esteemed the elderly for their wisdom. This shift, influenced by media and globalization, fosters negative stereotypes surrounding ageing, contributing to social isolation, depression, and health issues among older adults. In India, these challenges are exacerbated by a lack of affordable healthcare, changing disease patterns, and evolving family structures. By 2050, India is projected to have 319 million older adults, intensifying strain on healthcare systems. Neurodegenerative conditions like dementia, affecting 4 million Indians presently and projected to surge to 13.4 million by 2050, pose substantial burdens on healthcare. Mental health issues and challenges related to mobility and independence further warrant attention, with non-communicable diseases such as heart diseases, stroke, and diabetes being leading contributors to disability-adjusted life years among the elderly., fosters negative stereotypes surrounding ageing,
"The Longitudinal Ageing Study of India (LASI) launched in 2016 by the Ministry of Health

andFamily Welfare is a full-scale national survey and a seminal study on the status of the ageingpopulation in India. The report has provided several valuable insights into the processand impactof ageing in India."

The highlights of the report are:

Dimensions	Key Findings
Health	Physical Health • Approximately one in every four Indians aged over 60 and one in every five Indians aged over 45 reported experiencing poor health. • Chronic diseases affect 75% of the elderly population. • Disabilities are present in 40% of elderly individuals. • One out of every four elderly individuals has multiple health conditions. • Urban senior citizens in India are more prone to diabetes, while cancer prevalence is increasing, particularly in urban areas. Mental Health: • Mental health issues affect around 20% of the elderly population in India. • The prevalence of probable depression among the elderly is significantly higher than the reported diagnosis rate, indicating a considerable burden of undiagnosed depression. • Nearly one-third of the elderly exhibit symptoms of depression. Functional Abilities: • Approximately 11% of the elderly population experiences some form of impairment. • About a quarter of seniors have limitations in their activities of daily living. • More than half of the elderly face difficulties with tasks such as stooping, climbing, or kneeling. • Nearly half of the elderly population utilizes aids or supportive devices. Access to Healthcare Facilities: • Hospitalization is experienced by 7% of the elderly. • Around 60% of the elderly received outpatient department (OPD) care in the year preceding the LASI survey."
Social	Demography-specific: • Elderly individuals currently constitute 12% of the total population and are projected to reach 319 million by 2050, with an annual growth rate of approximately 3%. • The sex ratio among the elderly population stands at 1065. • Women comprise 58% of the total elderly population, with 54% of them being widows. • The overall dependency ratio is 62 per 100 working-age population. Living Pattern-related: • Around 28% of the elderly live with their children but without a spouse. • Approximately 6% of the elderly live alone, with 9% of elderly women living alone. • Seven out of every ten elderly persons reside in rural areas. Diet: • Food insecurity is rising among India's elderly population. • Nearly 6% of individuals over 45 years old in India either consume smaller portions or skip meals, while 5.3% go hungry even when they feel

	hungry.
	Knowledge and Awareness:
	• There is a low level of awareness among the elderly regarding available welfare provisions. For example:
	• Only 12% are aware of the Maintenance and Welfare of Parents and Senior Citizens Act 2007.
	• Awareness levels for senior concessions, IGNOAPS, IGNWPS, and the Annapurna Scheme are at 28%, 50%, 44%, and 12%, respectively.
	• About 24% face difficulties in providing necessary documents.
	Living Conditions and Quality of Life:
	• 32% of the elderly have low expectations life.
	• Approximately 5% of India's elderly population reports experiencing abuse, including physical, sexual, psychological, or financial mistreatment, with a higher prevalence among elderly women and those living in rural areas.
Financial & Economic	Work:
	• Around half of male senior citizens are engaged in work, whereas approximately 22% of female senior citizens are employed.
	• Senior citizens residing in rural areas are more likely to be employed compared to their urban counterparts. Pension:
	• A significant portion, 78%, of the elderly population does not have access to a pension.
	Access to Healthcare Finance:
	• Merely 18% of seniors have health insurance coverage.
	• The average out-of-pocket expenditure in private healthcare facilities during the last in-patient visit amounts to Rs. 31,933.
	• Health-related expenses constitute the primary cause of indebtedness, accounting for 26% of cases in urban India.
	Cost of Ageing:
	• The monthly per capita consumption expenditure (MPCE) of households with at least one elderly member is Rs. 2,948, slightly lower than households without elderly members (Rs. 3,001).
	• Similarly, the monthly per capita income (MPCI) of households with at least one elderly individual is lower compared to households without elderly members, with figures of Rs. 3,568 and Rs. 4,098, respectively.
Digital Wellbeing	Access to mobile phones
	• "While mobile phone is the most prevalent consumer durable, with nearly 87% of Indian households having access to it, their access, use, and utility for the elderly people is still debatable."

This report helps us understand the various factors that affects the health and well being of a senior citizen. In India, the elderly population confronts numerous health challenges across various aspects. Many seniors report poor physical health, often marked by chronic diseases and disabilities, with prevalent conditions like diabetes and cancer particularly impacting urban areas. Mental health issues affect approximately 20% of seniors, with probable depression often underdiagnosed, leading to a significant proportion experiencing depressive symptoms. Functional limitations are widespread, necessitating aids or supportive devices for daily activities.

**Efforts to improve healthcare and well being of seniors**
Global Initiatives

Efforts to address senior care on a global scale have gained momentum in recent years, with various countries and international organizations prioritizing the well-being of older adults. The World Health Organization (WHO) has been at the forefront of advocating for policies and programs that promote healthy ageing and ensure access to

essential healthcare services for older populations worldwide. Through initiatives such as the Global Strategy and Action Plan on Ageing and Health, WHO aims to address the diverse needs of older adults, including preventive healthcare, treatment for chronic conditions, and social support. Additionally, the United Nations has recognized the importance of senior care in achieving sustainable development goals, emphasizing the need for inclusive policies that cater to the needs of ageing populations. Many countries have implemented measures to enhance senior care, including the establishment of community-based care services, support for family caregivers, and the development of age-friendly environments. Collaborative efforts between governments, non-governmental organizations, and the private sector have been instrumental in advancing senior care initiatives on a global scale, with a focus on promoting dignity, autonomy, and quality of life for older adults.

Initiatives of the Indian Government

India's government is actively engaging in initiatives to meet the needs of its aging population. Recognizing the challenges and opportunities presented by a growing elderly demographic, the government has rolled out several programs aimed at improving the lives of senior citizens. One such initiative is the SACRED portal, which facilitates connections between older individuals and potential employment opportunities in the private sector, thereby supporting their continued participation in the workforce. Additionally, the Senior Ageing Growth Engine (SAGE) initiative, formulated based on expert recommendations, seeks to promote and incentivize the development

of products and services tailored to the needs of seniors.
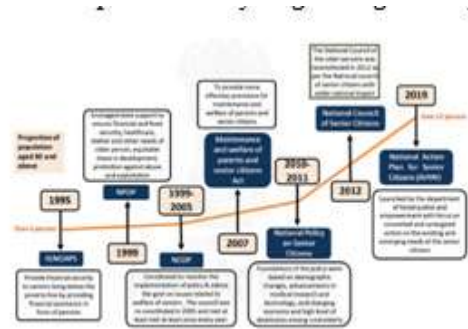
The Ministry of Social Justice and Empowerment (MoSJE) serves as the primary ministry responsible for addressing the welfare needs of senior citizens in India. It plays a central role in formulating policies and programs for the elderly population, collaborating closely with other government ministries such as Finance, Health and Family Welfare, as well as state governments, NGOs,icivil society, and the private sector. MoSJE has spearheaded the development of India's National Policy on Older Persons and oversees the implementation of initiatives like the Atal Vayo Abhyudaya Yojana (AVYAY). Additionally, the"National Institute of Social Defense, under MoSJE's purview, has been entrusted with conducting training and research on social defense issues, including the well-being of senior citizens, for more than a decade. The Maintenance and Welfare of Parents and Senior Citizens Act, 2007, which is a significant legislative milestone, was initiated under the auspices of MoSJE."

Government Initiatives to provide support to senior care in India	
Welfare Schemes & Programmes	• "National Social Assistance Program (NSAP) - Indira Gandhi Old Age Pension Scheme (IGNOAPS) - Indira Gandhi National Disability Pension Scheme (IGNDPS)" • "Atal Vayo Abhyudaya Yojana (AVYAY) - Integrated Program for Senior Citizens (IPSrC) - State Action Plan for Senior Citizens (SAPSrC). - Rashtriya Vayoshree Yojana' (RVY) - Livelihood and Skilling Initiatives for Senior Citizens - Promoting silver economy - Channelizing CSR funds for elderly care" • National Program for Health Care of the Elderly (NPHCE) • Pradhan Mantri Vaya Vandana Yojana • VayoMitra – Ayush Geriatric Healthcare Services under Ayush Public Health Programs (National Ayush Mission) • National Council of Senior Citizens (NCSrC)

	• Rashtriya Vayoshri Yojana (RVY) • Varishtha Pension Bima Yojana • Atal Pension Yojana • Ayushman Bharat – PMJAY • Ayurswasthya Yojana • Senior Able Citizens for Re-Employment in Dignity (SACRED) • Action Groups Aimed at Social Reconstruction (AGRASR Self-Help Groups) • Senior care Ageing Growth Engine (SAGE) • Annapurna Scheme & Antyodaya Anna Yojana
"Other Welfare Measures"	• National Helpline for Senior Citizens i.e., Elder Line with toll-free number 14567 • Senior Citizens' Welfare Fund • Vayoshreshtha Samman • Accessible India Campaign (Sugamya Bharat Abhiyaan) • E-Anudaan Portal • o Seats reserved in buses, railways, and metro trains
Constitutional Provisions	• Article 41: Right to work, to education, and to public assistance in certain cases - The State shall, within the limits of its economic capacity and development, make effective provision for securing the right to work, to education, and to public assistance in cases of unemployment, old age, sickness, and disablement, and in other cases of undeserved want • Article 46: Promotion of educational and economic interests of Scheduled Castes, Scheduled Tribes, and other weaker sections - Other weaker sections include the elderly, disabled, etc. • 7th Schedule of the Indian Constitution - Item No. 9 of the State List and item 20, 23 & 24 of the Concurrent List relates to the old age pension, social security and social insurance, and economic and social planning - Entry 24 in the concurrent list deals with "Welfare of Labour, including conditions of work, provident funds, liability for workmen's compensation, invalidity and old age pension and maternity benefits.
Legal Provisions	• Section 20 of the Hindu Adoption and Maintenance Act, 1956 makes it an obligation to maintain an aged parent • Under Section 125 of the Criminal Procedure Code, elder parents can claim maintenance from their children • Section 88-B, 88-D & 88-DDB of the Income Tax Act allow senior citizens to claim a discount in tax • The Maintenance and Welfare of Parents and Senior Citizens Act, 2007 • NALSA (Legal Services to Senior Citizens) Scheme, 2016

The Indian government has taken significant strides towards addressing the needs of its aging population. These measures are not only aligned with national objectives but also resonate with international commitments, highlighting the government's dedication to fostering an inclusive and supportive environment for individuals of all age groups. By providing specialized healthcare facilities, creating employment opportunities, and promoting the growth of the silver economy, the

government is actively building a society that values and respects its elderly citizens, ensuring their well-being and dignity are upheld.

II.   FINDINGS

The majority of respondents visit healthcarefacilities and seek medical assistance irregularly or only when they face any issue amounting to 52% (16% and 36% respectively), followed by those who visit once every 2-3 months is 22%. The data suggests that majority of population doesn't give due importance to routine healthcare. The irregularity in healthcare visits could indicate potential barriers to accessing healthcare services, such as geographical distance, financial constraints, or limited awareness about the importance of regular check-ups etc. the data also infers that only about 34% of the total population maintains record of their visits and monitor their health status. Where as majority of the population hardly sometimes keep the record or doesn't keep a record of their visits at all. Hence the Indian population is not immune of having regular health checks and maintaining its records which is important for healthy ageing and hence a matter of concern among the aging population
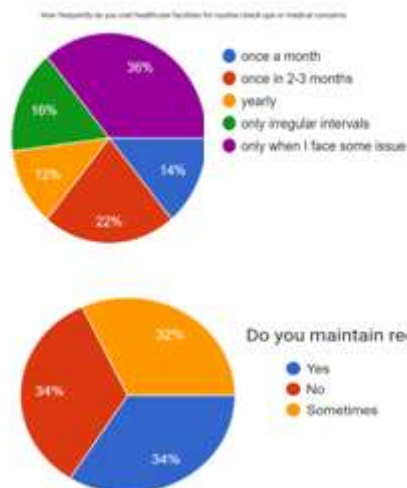

The researcher found that approximately 46% of seniors spend a significant portion of their finances on medical expenses, with about 30% spending even more than the average percentage of their income. This high expenditure on medications indicates financial strain, leading to reluctance among the elderly to access healthcare services regularly. Indeed, 28% of the population feels that financial constraints significantly affect their ability to access necessary healthcare services and medication, while another 28% moderately agree. Only 20% of the population is unaffected by financial constraints when accessing healthcare,

highlighting the pervasive impact of financial inadequacy on healthcare accessibility and individual well-being.

Moreover, the data reveals that a mere 26% of the total population never encountered difficulty finding suitable healthcare services, while a significant 76% struggled to find appropriate healthcare professionals and clinics. This difficulty arises predominantly due to affordability and accessibility issues. Those with government jobs have coverage such as CGHS for themselves and their spouses, but locating these healthcare services proves challenging. Meanwhile, individuals in the private sector lack such privileges and find private hospitals unaffordable. The educated class, in particular, avoids government hospitals due to overcrowding, unhygienic conditions, and technological deficiencies, contributing to the widespread difficulty (76%) in finding suitable healthcare professionals and clinics.In addition to the challenge of finding suitable healthcare professionals or institutions, there's the issue of claiming health insurance. About 30% of the total population lacks insurance coverage, relying solely on governmental institutions. Among the 70% with medical insurance, only 2% didn't encounter any problems in claiming it. The majority faced difficulties, primarily needing to pay the amount themselves upfront and then seek reimbursement from insurance companies.

Awareness

The researcher found that many educated senior citizens in India lack awareness of government schemes and resources available to them. Only 14% were fully aware of such policies, with 48% unaware altogether. Despite high knowledge about preventive measures, only 20% actively incorporated them. Additionally, while telehealth services are available, only 35.4% of those aware utilized them. Moreover, a helpline number for the elderly (14567) is known to just 36.6% of the population but was found consistently congested and non-functional when contacted. HelpAge India, an NGO for disadvantaged elderly, operates its helpline (18001801253) but is not widely recognized.
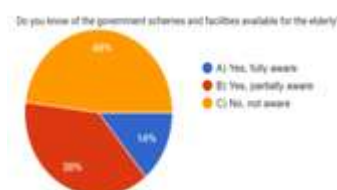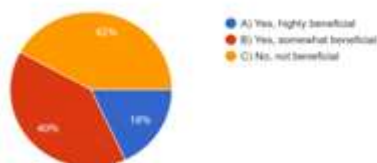
Opinion

The analysis of collected data sheds light on the opinions of the elderly population in East Delhi. The research reveals an overall average (satisfactory) experience among the elderly, signaling a need for significant improvement, particularly as many in this demographic are new seniors. While 36% of respondents rated their experience as satisfactory and an equal percentage as good, more than 18% rated it as poor.

Regarding technological advancements in healthcare, elderly respondents expressed mixed views. While acknowledging the overall quality enhancement in healthcare services, they highlighted challenges such as difficulty in learning new technologies, maintaining digital literacy, and accessibility issues. Many emphasized that as one ages, cognitive abilities decline, making technological advancements more complicated to navigate. Despite these challenges, 38% of respondents felt that technology has improved healthcare access, while the majority (58%) agreed that healthcare providers address their needs and concerns. However, concerns persist regarding the insufficient number of healthcare providers, with 22% rating services as poor due to overburdened professionals. To address this, 88% of respondents advocate for increased collaboration between healthcare providers, community organizations, and both private and government sectors to ensure accessible and affordable treatment for the elderly.
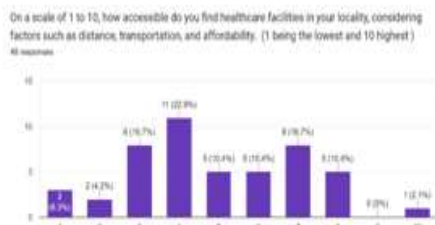
Challenges

The **fragmented service delivery approach** in elder healthcare, marked by disparate service providers, hinders the provision of quality care, leading to a **lack of integrated healthcare**

tailored to the elderly. This gap extends to mental health services, immunization programs, **nutritional needs, and home-based care models**. Additionally, there's a significant disparity in **elder care infrastructure, with insufficient facilities,** particularly in rural areas, exacerbating the challenge. Furthermore, a shortage of trained personnel in geriatric care, coupled with limited awareness among the elderly about available provisions, financial insecurity, and inadequate support systems, compounds the issue, highlighting the urgent need for comprehensive reform to address the multifaceted challenges faced by the elderly population.
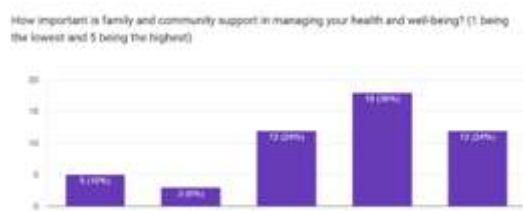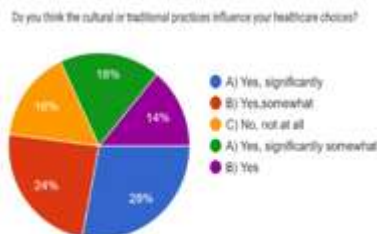
III. CONCLUSION

The researcher wanted to study the socio economic cultural practices in order to find out whether money is the only barrier between the senior citizens and their wellbeing or there exists various other factors including money for the healthy being of the seniors

On questioning the population, the researcher understood that other various socio economic factors affect the healthy being of an aging individual apart from money such as:

- Family and community support
- Cultural and traditional practices of the Indian society form the basic lifestyle practices however, more western practices are being adopted in Indian culture due to which aging is getting difficult and more complex (cultural practices may include waking up early, walking miles instead of vehicles, eating home cooked and home grown, practice of sitting

and cleaning the floor of the house, joint family setup etc)
- Accessibility is another major problem faced by the growing age, as they are not that volatile and active to travel off places of need like clinic, medicine shops, X-ray shops etc alone and children are often busy in their jobs and school to spare time to provide them regular access to healthcare services.
- Awareness and education: People are not aware of the benefits they are entitled to by the government. And therefore they miss out on the opportunity.
- Lack of trust on the governmental intuitions and professionals.

Hence there is a need for improvement in the hole environment surrounding the elderly, and health is foremost priority area for wellbeing of an individual. An elderly in the society can be a boon or a bane depending on his health which includes mental, physical, emotional health.

IV. RECOMMENDATIONS

Increasing awareness among the elderly population is essential to promote early detection and prevention of chronic conditions. Utilizing modern technology for health education can help in fostering positive health behaviors. Early detection through population-based screening programs and expanding access to diagnostic services for common chronic conditions are crucial steps. Moreover, robust monitoring systems, particularly for neurodegenerative conditions like dementia, need to be strengthened to ensure timely care. Home care services hold significant potential, especially considering the majority of elderly individuals grappling with chronic ailments, while telehealth services offer convenient access to healthcare professionals, benefiting those with mobility challenges or in remote areas. However, challenges such as digital literacy and affordability must be addressed to ensure equitable access to telehealth services. Additionally, focusing on geriatric health insurance, promoting Ayush-based services, and harnessing the potential of the silver economy are key strategies to enhance healthcare for the elderly population. Furthermore, workforce development, community-based assistance, and seniors-friendly infrastructure are vital for improving health outcomes and promoting active aging within communities.

BIBLIOGRAPHY

[1]. https://www.livemint.com/news/india/indias-elderly-population-to-double-by-2050-surpassing number-of-children-warns-report-11695865492972.html
[2]. https://www.who.int/india/health-topics/ageing
[3]. https://vikaspedia.in/social-welfare/senior-citizens-welfare/senior-citizens-status-in-india
[4]. Sustainable health—a call to action, https://bmcglobalpublichealth.biomedcentral.com/articles/10.1186/s44263-023-00007-4
[5]. Sustainability in healthcare: building a healthy future for people, society, and the planet, https://www.astrazeneca.com/what-science-can-do/topics/sustainability/driving-sustainability-in-healthcare.html#!
[6]. Healthy aging, https://www.mckinsey.com/mhi/focus-areas/healthy-aging
[7]. Global Health Estimates (2019): Leading Causes of DALYs. The Global Health Observatory. WHO. Retrieved January 12, 2023 from: https://www.who.int/data/gho/data/themes/ mortality-and-global-health-estimates/global-health-estimates-leading-causes-ofdalys.
[8]. Longitudinal Ageing Study in India (LASI) Wave 1. Investigation of Health, Economic, and Social Well-being of India's growing elderly Population. 2020.
[9]. National Sample Survey Organisation. Morbidity, Health Care and the Condition of the Aged – NSS 60th Round (January-June, 2004-05).
[10]. Watts N, Amann M, Arnell N, Ayeb-Karlsson S, Beagley J, Belesova K, et al. The 2020 report of The Lancet Countdown on health and climate change: responding to converging crises. The Lancet. 2020 Dec; 397(10269).
[11]. Bridge the Gap: Understanding Elder Needs. A HelpAge India 2022 Report. Retrieved September 23, 2022 from: https://www.helpageindia.org/wp-content/uploads/2022/06/Bridge-the-Gap-Understanding-Elder-Needs-a-HelpAge-India2022-report-1.pdf

[12]. NSO (2021), The elderly in India, National Statistical Office, Ministry of Statistics & Program Implementation, Government of India, New Delhi

[13]. Financial security for India's the elderly: The imperatives. 2017. Retrieved September 25, 2022 from: https://www.pfrda.org.in/writereaddata/links/crisil%20pfrda%20 report869bc61d-a231-42de-a77c-ff614b0af650.pdf

[14]. https://main.mohfw.gov.in/?q=major-programmes/Non-Communicable-Diseases/Non-Communicable-Diseases-1

[15]. https://www.ncbi.nlm.nih.gov/books/NBK109208/

[16]. https://www.who.int/india/health-topics/ageing

[17]. https://www.business-standard.com/india-news/healthcare-infra-must-adapt-to-requirements-of-

[18]. citizens-above-60-report-123112400774_1.html

[19]. https://www.bajajfinservmarkets.in/govt-schemes/goverment-health-schemes-for-senior-citizens.html