Elderly People in India: The Changing Social Scenario

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Abstract: As well as world India is witnessing a profound demographic shift during two – three decades. Elderly people in India—typically defined as those aged 60 and above—represent a growing segment of the population due to increased life expectancy and declining fertility rates. As of 2021, they made up about 10% of the population, and this figure is expected to rise significantly in the coming decades. The elderly population is projected to reach over 300 million by 2050. This demographic transformation is reshaping the social fabric, generational relationships, and public policy. Traditionally elderly were highly honoured and had full authority in the family or community and had decision making responsibilities in the economic and political activities of the family. But, the transition of Indian society from the traditional pre-industrial to modern industrial has led to the emergence of nuclear families, modern social values and urbanism as a way of life. Due to this transformation of Indian Society, the safe, secure and esteemed life of elderly people lost their space and consequently they became marginalized in their home and the new social scenario emerged that is unable to take care our elder. However, despite the increased vulnerability of the aged, it is fortunate that this problem has not assumed serious proportions; nonetheless, it requires attention.

Key words: Demographic shift, elderly, social fabric, transformation, marginalized, *vulnerabilit.*

Introduction- The cultural perspective on elderly people in India is deeply rooted in traditions of respect, reverence, and familial duty, although modern societal changes are reshaping these norms. Respect for elders is a core value in Indian culture. Elders are seen as custodians of wisdom, life experience, and moral guidance. Their advice is often sought in family matters and decision-making. The joint family system traditionally ensured that elderly parents were cared for by their children and grandchildren. Elders often play a key role in child-rearing, especially in joint families, acting as caretakers when both parents work. They are expected to maintain moral authority in the family, settling disputes or offering spiritual and ethical counsel. In many rural areas, they continue to be influential in local governance or religious ceremonies.

Hinduism, the majority religion, emphasizes the "Ashrama system", where the final stage of life (Vanaprastha and Sannyasa) is devoted to reflection, spirituality, and detachment from material concerns. Religions like Buddhism, Jainism, Islam, and Christianity in India also preach compassion and duty toward parents and elders. The idea of karma and dharma reinforces the belief that caring for one's elders is a moral and spiritual obligation.

Population ageing is an inevitable and irreversible demographic reality that is associated with welcome improvements in health and medical care. With longevity and declining fertility rates, the population of older persons (60 years and above) is globally growing faster than the general population. Three key demographic changes—declining fertility, reduction in mortality and increasing survival at older ages—contribute to population ageing. They reflect a shift in the age structure from young to old. The percentage of the elderly in India has been increasing swiftly in recent years, and the trend is likely to continue in the coming decades. Older people are a valuable resource for any society. Ageing is a natural phenomenon with opportunities and challenges. According to Census 2011, India has 104 million older people (60+years), constituting 8.6% of total population. Amongst the elderly (60+), females outnumber males. The share of population over the age of 60 years is projected to increase from 10.5 percent in 2022 to 20.8 percent in 2050. By the end of the century, the elderly will constitute over 36 percent of the total population of the country.

Traditionally, the care of parents and older lies on younger generation. All kinds of needs of elder fulfill within joint family. Generally, this task rests on women be they spouse, daughter or daughter-in law. Women are the main source of emotional support and first to look after the elderly while sons are distant in care giving role. Changes in families and consequent change in role of women with paid work outside home has led to the development of a feeling of self- centeredness, individualism and youngsters being concerned only about themselves. These changes have adversely affected the status of elderly. With urbanization, families are becoming nuclear, smaller and are not always capable of caring for older relatives. There is still strong cultural pressure to 'look after' the parents in the family. Elderly widows are the most vulnerable segment among India's population. Majority of the economically dependent elderly are supported by their

children in India; around 78% of the economically dependent elderly were supported by their own children and 3% by grandchildren. In the case of widows, 87% of the elderly received financial assistance from their children and 5% from their grandchildren.

Urbanization, migration, and nuclear family structures have led to physical and emotional distance between elders and younger generations. Some elderly people are now living in old-age homes, which were once considered taboo or shameful. The stigma around this is gradually fading, especially in cities. Intergenerational conflict over values, lifestyle, and autonomy has become more common, particularly in middle-class urban households. Government and civil society are considered as care-taker of elder people in place of their children and relatives. Role of family in this regard became non-functional. A shift from joint families to nuclear families has led to increased social isolation. Elder abuse and neglect are growing concerns, often hidden due to cultural stigma. Loneliness is a significant issue, particularly among widowed or childless elders.

Suneeta Paswan (2004) in her study on Psychosocial status of institutionalized senior citizens of Uttar Pradesh and Union Territory Chandigarh found that one of the respondents who joined the institution were in the age group of 61-71 years having semi-urban background from nuclear and small family. Reasons behind joining the institutions were that they were neglected by family members and wanted to meet their basic needs and have social security.

Rajan and Sarchandraraj (2005) made a survey of elders in old age homes in Pondicherry. The result reported that the main problems faced by the old are poor health, lack of finances, loneliness and lack of self-esteem because of retirement from job. These factors can be mitigated if the elderly begin planning for retirement while still in service.

Dave and Chandra (2006) revealed that the financial insecurity was the topmost problem in security and socio emotional security. Overall insecurity increases as the age advances.

National sample survey (2006) reported that the support from the family at the time of old age is not only restricted to financial assistance. It includes the physical care also. Around 84% of the physically immovable persons were cared by their own family members mostly by daughter in-laws. However, around 8% of the elderly reported that nobody was there to help them.

Anoop Kumar Bhartiya (2008) stated that older people increasingly suffer social losses with age. Their social life is narrowed by loss of work associates, death of relatives, friends and spouse and poor health which restricts their participation in social activities.

Elderly people in India face a complex mix of social, economic, health, and psychological issues, especially as traditional support systems are being eroded by modernization, urbanization, and demographic shifts. The problems faced by elderly are as follows:
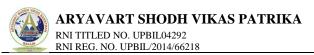
Health Problems: Chronic illnesses like diabetes, arthritis, hypertension, and heart diseases are widespread. Most public hospitals have lack specialized services for the elderly. Mental health concerns like depression, anxiety, and dementia are common but underdiagnosed and stigmatized. Disability and mobility problems make independent living difficult without proper infrastructure or assistance. Rising healthcare costs and lack of insurance coverage make older adults financially vulnerable. Dependence on children or relatives often causes financial stress and intergenerational conflicts.

Social Problems: Breakdown of joint family systems has left many elderly people living alone, especially in urban areas. Children moving abroad or to other cities for work leads to emotional neglect. Old-age homes are increasing, but many seniors see them as a last resort due to social stigma and emotional detachment.

Elder Abuse and Neglect: Elder abuse can be physical, emotional, financial, or neglectful. According to HelpAge India, around 1 in 2 elderly people experience abuse. Abuse often comes from immediate family members, and it is rarely reported due to fear, dependency, or shame. Lack of legal awareness or access to justice worsens the problem.

Psychological Problems: The common psychological problems that most of the older persons experience are: feeling of powerlessness, feeling of inferiority, depression, uselessness, isolation and reduced competence. These problems along with social disabilities like widowhood, societal prejudice and segregation aggravate the frustration of elderly people. Studies report that conditions of poverty, childlessness, disability, in-law conflicts and changing values were some of the major causes for elder abuse.

Gender-Specific Issues: Elderly women face greater vulnerability due to widowhood, lower literacy, and lack of financial independence. Many elderly women live longer but with fewer resources and greater social isolation.

The problems faced by elderly people in India arise from a combination of social, economic, demographic, and systemic causes. These are rooted in both traditional and modern shifts in Indian society. Here's a breakdown of the key causes behind the issues affecting the elderly:

Breakdown of the Joint Family System: Traditional support structures are weakening due to nuclear family setups. Migration of children for work or education leaves elders emotionally and physically isolated. In urban areas, space and cost pressures reduce multigenerational living.

Urbanization and Migration: Young people are moving to cities or abroad, leaving elderly parents behind in rural or semi-urban areas. Lack of community support or local facilities exacerbates loneliness and dependence.

Economic Insecurity: A large part of India's elderly worked in the unorganized sector, which offers no pension or social security. Rising healthcare and living costs strain limited savings. Women, especially widows, often lack ownership of assets or income.

Inadequate Healthcare Infrastructure: Lack of geriatric care units and trained professionals. Overburdened public health system fails to meet the chronic care needs of seniors. Mental health services are almost non-existent for older adults in most areas.

Digital Divide: Rapid digitization of services (banking, insurance, health) excludes elders who are not tech-literate. This leads to dependency on others and vulnerability to fraud or exploitation.

Lack of Awareness and Education: Many elderly are unaware of government schemes or their legal rights. Low literacy among older women further inhibits access to welfare benefits.

Weak Legal Enforcement: Existing laws (like the Maintenance and Welfare of Parents and Senior Citizens Act) are poorly implemented. Elder abuse often goes unreported due to fear, shame, or emotional dependence.

Gender Inequality: Older women face greater neglect, especially widows, due to gendered roles, inheritance issues, and social marginalization. They often have lower health access, financial security, and autonomy.

Cultural and Social Transition: Modern values emphasizing individualism and productivity may devalue the non-working elderly. Ageism and stereotypes (seeing the elderly as burdens) lead to marginalization.

Policy Responses and Interventions- Government Schemes:

- **NSAP / IGNOAPS:** Provides minimal pensions (~₹300–500/month), with some state top ups; coverage remains limited.
- **National Programme for Health Care of Elderly (NPHCE):** Geriatric services across healthcare levels.
- **Ayushman Bharat PM JAY extension:** Recent coverage expansion now includes all 70+ seniors.
- Assistive and mobile services: Rashtriya Vayoshri Yojana and Kerala's Vayomithram provide devices and mobile clinics.
- **Antyodaya Scheme:** 1.5 crore families identified from amongst the BPL families are provided food grains at the rate of 35 Kg. per family per month.
- **The Maintenance and Welfare of Parents and Senior Citizens Bill, 2007:** This act seeks to make it a legal obligation for children and heirs to provide maintenance to senior citizens. It also permits state governments to establish old age homes in every district.

Civic, NGO, Private-sector Efforts-

- **HelpAge India:** Mobile health units serving 2.9 million elderly across 24 states; elder self-help programs.
- **Senior living & assisted living:** Growth in private senior communities with mixed quality; cultural resistance & affordability remain concerns.
- **Digital literacy:** Targeted programs to bridge tech gaps for seniors.

Here are practical and policy-level solutions to address the issues faced by the elderly in India, aligned with health, social security, legal reforms, and community engagement:

Health and Geriatric Care Improvements: Strengthen geriatric services in primary health centers (PHCs) and public hospitals. Expand the National Programme for Health Care of the Elderly (NPHCE) with more outreach and trained professionals. Launch mobile healthcare units in rural and semi-urban areas. Promote telemedicine with elder-friendly interfaces. Increase mental health support, including dementia care, counseling, and awareness campaigns.

Social Security and Economic Support: Expand and universalize pension schemes (e.g., Indira Gandhi National Old Age Pension Scheme) to cover more people and raise pension amounts. Offer subsidized or free health insurance specifically for the elderly, with simplified claim processes. Provide financial literacy programs to help seniors manage savings, prevent fraud, and understand entitlements.

Elder-Friendly Infrastructure and Digital Inclusion: Develop age-friendly public spaces (parks, benches, accessible toilets, ramps, signage). Improve transport accessibility with priority seating, easier ticketing, and mobility support. Run digital training workshops (via community centers or NGOs) to help elderly people use smartphones, access online banking, healthcare, and government services.

Legal Reforms and Protection: Strengthen implementation of the Maintenance and Welfare of Parents and Senior Citizens Act (2007) by setting up fast-track tribunals and support cells. Raise awareness of legal rights through media campaigns and workshops. Create helplines and legal aid services specifically for elderly abuse or neglect.

Conclusion- As India heads toward a "silver society"—with 1 in 5 people aged 60+ by mid-21st century—transforming elder care is imperative. A multi-dimensional, inclusive strategy is needed—covering economic security, healthcare, infrastructure, mental health, and social integration. Success depends on cohesive policies, technology, community partnership, and intergenerational solidarity. Strengthening these efforts today will ensure dignity and resilience for India's elderly in decades to come.

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