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Proceedings of the Seminar on

Ageing in India: Actionable Solutions

(18 December, 2024, New Delhi)

Sankala Foundation February 2025 The seminar on 'Ageing in India: Actionable Solutions' was organised by the Sankala Foundation in New Delhi on the 18th of December, 2024, in collaboration with the National Human Rights Commission india, and with the support of NITI Aayog and the Ministry of, Social Justice and Empowerment, Government of India.

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Front cover: Al-generated image of an elderly woman Back cover: A senior holding a younger hand for support Design: Narender Photos: Shikhar Mohan

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"We are committed to ensuring accessible, affordable and top quality healthcare for every Indian. In this context, the Cabinet today has decided to further expand the ambit of Ayushman Bharat PM-JAY to provide health coverage for all citizens above 70 years. This scheme will ensure dignity, care and security to 6 crore citizens!"

Shri Narendra Modi

Hon'ble Prime Minister of India (11 September, 2024)

About Sankala Foundation

Sankala Foundation is a non-profit organisation dedicated to advancing research, training, and advocacy in the field of climate and sustainability. Sankala Centre for Climate and Sustainability, established by the Foundation, is working on climate resilience, water and sanitation, energy, public health, and education to improve the lives of marginalised communities. The Centre collaborates with government bodies, NGOs, and experts to develop innovative, evidence-based solutions that address climate change, resource management, and poverty eradication.

Role in Public Health

Transforming public health care is one of the core priorities of the Foundation. Post the COVID-19 pandemic, the need for a more resilient healthcare system has become abundantly clear. The health sector faces several challenges, such as affordability and accessibility concerns, poor infrastructure, shortage of skilled health personnel, and low coverage of insurance. Sankala Foundation seeks to identify sustainable, practical, and replicable solutions that can address key gaps in the country's health system and improve the overall well-being of people.

In this direction, the foundation has also been studying the unique needs and challenges of the elderly population. With the country's rapidly ageing demographic, there is an increasing demand for tailored healthcare solutions that cater to this group. The elderly often face a dual burden of diseases (communicable and non-communicable) and limited access to age-appropriate health services, compounded by social and economic vulnerabilities such as isolation, dependency, and financial insecurity. By understanding the specific requirements of older adults, the Foundation seeks to contribute to the development of age-friendly healthcare services, promote healthy ageing, and ensure that the elderly are not left behind in the push for universal health coverage.

Background

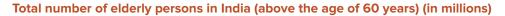
The world is undergoing an unprecedented demographic shift, with populations ageing rapidly, both globally and in countries like India. Three important demographic changes are leading to this shift in age structures, i.e., falling fertility rates, declining mortality, and an increasing life expectancy. In 2018, for the first time in history, people aged 65 years and above outnumbered children under the age of 5. By 2050, the number of people aged 60 and above is expected to more than double, reaching nearly 2.1 billion, comprising 22% of the global population.

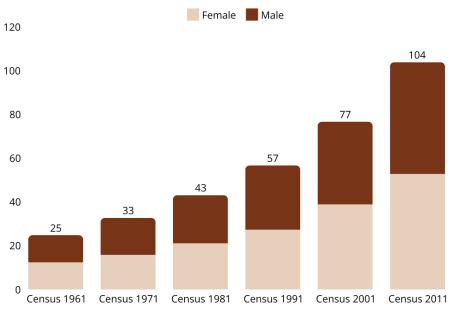
In developing countries, ageing is taking place at an unprecedented pace leading to an increase in the proportion as well as absolute size of the elderly population. While the doubling of the elderly population took nearly 150-200 years in developed countries, it is happening in just 50-70 years in most developing countries, as a result of better healthcare and technology transfer. This has a profound impact on the old-age dependency ratio as rapid ageing is not accompanied by a commensurate increase in wealth.

The older population is significantly different from people in other age groups, associated closely with several changes such as greater health problems, increased need for care, financial vulnerability and physical immobility, among others. Governments must plan appropriately to cater to these needs, by establishing healthcare insurances and pensions, providing training to caregivers, creating age-inclusive infrastructure, and more.

Indian scenario

As observed from findings of the Census of India, elderly persons (above 60 years) rose from 24.7 million in 1961 to 103.8 million by 2011. This represents more than a four-fold increase in the elderly population in just 50 years. As of 2022, the number of people over the age of 60 in India was close to 149 million, comprising 10.5% of the total population. By 2050, it is expected that the share of elderly persons in India will increase to 20.8%, or approximately 347 million individuals (UNFPA, 2023), making it one of the fastest-growing elderly populations. Moreover, Indian households are witnessing a shift from traditional joint families to nuclear families, leading to a much greater number of elderly living alone, without the support of their children. Simultaneously, migration, both foreign and domestic, in search of better economic opportunities, often leaves elderly alone to fend for themselves. An ageing population presents several challenges and opportunities, impacting individuals and society as a whole.





Source: MoSPI, 2021

About the Seminar on 'Ageing in India: Actionable Solutions'

The Seminar on 'Ageing in India: Actionable Solutions' was organised by the Sankala Foundation in collaboration with the National Human Rights Commission, India, with the support of NITI Aayog and Ministry of Social Justice and Empowerment. As India and the world continue to experience a rapidly growing elderly population, it is essential to create sustainable, inclusive policies that promote healthy, productive, and dignified lives for older adults. Through thoughtful dialogue and collaboration, this seminar aimed to generate practical, evidence-based solutions that will enhance the lives of ageing populations in India and globally.

The Ministry of Social Justice and Empowerment is drafting a revised National Policy for Older Persons, necessitated by the growing senior citizen population, the need for an integrated approach instead of isolated efforts across different ministries, and the urgency to seek solutions. The seminar was organised to spotlight some of the concerns of elderly persons that may feed into the National policy currently under development.

Key themes of the Seminar

- 1. Addressing the health and nutritional needs of the elderly
 - Healthy ageing
 - Integrated healthcare and long-term care
 - Mental health services
 - Caregiving and respite care
- 2. Economic security, social inclusion and quality of life
 - Strengthen pension systems
 - Opportunities for meaningful engagement
 - Address gender-sensitive social protection
 - Ageism and intergenerational bonding

Programme				
Inaugural session				
Welcome address by Dr. Abha Jaiswal, Visiting Fellow, Sankala Foundation				
Introductory note by Mr. Devendra Kumar Nim, Joint Secretary, National Human Rights Commission, India				
Presentation by Ms. Monali P. Dhakate, Joint Secretary, Ministry of Social Justice & Empowerment				
Address by Mr. Bharat Lal, Secretary General, National Human Rights Commission, India				
Session I – Health and nutritional needs of the elderly				
Chair: Dr. V. K. Paul, Member (Health), NITI Aayog				
Session II – Economic security, social inclusion, and quality of life				
Chair: Mr. Amit Yadav, Secretary, Ministry of Social Justice and Empowerment				
Closing session				
Concluding remarks by Mr. Bharat Lal, Secretary General, National Human Rights Commission, India				

The seminar aimed to achieve the following key outcomes:

- Actionable recommendations: The seminar will develop a set of actionable recommendations that can
 inform future policy frameworks and social programmes, ensuring the dignity, health, and participation of
 older adults in society.
- Collaborative network: The seminar will foster partnerships among stakeholders, creating a network of professionals, researchers, and organisations working on ageing-related issues.

Key insights from the Seminar

Inaugural session

Welcome address by Dr. Abha Jaiswal, Visiting Fellow, Sankala Foundation

Dr. Abha Jaiswal initiated the session by welcoming the gathering and highlighting the urgency of addressing India's growing ageing population, which is projected to reach 347 million (21% of the total population) by 2050.

She underscored the challenges posed by this demographic shift, including the rising burden of



Dr. Abha Jaiswal, Visiting Fellow, Sankala Foundation, delivered the welcome address during the inaugural session

non-communicable diseases (NCDs), disabilities, mental health issues, and financial insecurity due to inadequate pensions and escalating healthcare costs. Dr. Jaiswal pointed out that societal shifts, such as urbanisation and shrinking family sizes, have eroded traditional support systems, leaving many elderly individuals isolated and vulnerable to abuse and ageism.

She acknowledged the diversity within the elderly population, noting that many seniors continue to lead active, healthy lives and possess untapped potential for mentorship and economic contributions. Emphasising the need for inclusive policies, Dr. Jaiswal advocated for strengthened social support systems, increased investments in geriatric healthcare, and the use of digital health tools. She also highlighted the importance of promoting social engagement, combating ageism, and creating skill-building and part-time employment opportunities for older adults.

Dr. Jaiswal urged for collaboration among various stakeholders to develop sustainable solutions and recognise the elderly as a valuable societal asset, capable of contributing significantly to both economic growth and societal well-being.

Introductory note by Mr. Devendra Kumar Nim, Joint Secretary, National Human Rights Commission, India

Mr. Devendra Kumar Nim highlighted the pressing issues elderly citizens face today and the burden this will be posing on healthcare systems and society at large. Mr. Nim also shared the various efforts made by the NHRC in this regard, such as the constitution of the Core Group of Rights of Older Persons, wherein stakeholders from different backgrounds gather at regular intervals to deliberate and make recommendations for the concerned organisations, state governments, etc.

Mr. Nim said that the NHRC had organised the National Conference on Rights of Older Persons in New Delhi, in October, 2024. The conference was successful in illustrating the challenges faced by older persons. However, there is a need to bring together experts in this domain to discuss and identify actionable solutions that can be suggested to relevant bodies to reach meaningful outcomes.

Mr. Nim emphasised on the vast repository of knowledge and experience held by this population group and the need to provide older persons with a dignified life. Specifically, issues of financial insecurity, social isolation and loneliness should be addressed through practical solutions.

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"The elderly are our assets and 'dharohar', as they are vast repositories of knowledge and experience".

⁻ Mr. Devendra Kumar Nim



(From left to right) Mr. Bharat Lal, Secretary General, NHRC, Dr. V. K. Paul, Member (Health), NITI Aayog and Mr. Devendra Kumar Nim, Joint Secretary, NHRC, spoke during the inaugural session

Presentation by Ms. Monali P. Dhakate, Joint Secretary, Ministry of Social Justice & Empowerment

Ms. Monali Dhakate is in charge of the Senior Citizen Division at the Ministry, and highlighted the



Ms. Monali P. Dhakate, Joint Secretary, MoSJE, shared about various governmental schemes for the aged

various government schemes and policies aimed at improving the quality of life of older persons. Of specific importance are the Maintenance and Welfare of Parents and Senior Citizens Act (MWPSC), 2007, and the National Policy for Older Persons, 1999, which form the mandate for work at the Senior Citizens Division at the Ministry.

Ms. Dhakate also outlined critical new interventions as proposed for the MWPSC Bill (2024) She highlighted the need for skill training, livelihood options, digital and financial literacy She also expanded on the various existing initiatives under the Atal Vayo Abhyudaya Yojana (AVYAY), the umbrella scheme of the Ministry. The AVYAY has six major components (see Figure 1) aligned with which it interacts with the states and UTs, as well as NGOs, private sector, and civil society organisations.



The Ministry of Social Justice and Empowerment observed the International Day of Older Persons on 1st October 2024, with the theme #AgeingWithDignity.

Address by Mr. Bharat Lal, Secretary General, National Human Rights Commission, India



Mr. Bharat Lal, Secretary General, NHRC, spoke about the need for change in functions of old age homes

Mr Bharat Lal, Secretary General, NHRC, discussed the evolving role of old age homes and the necessity for change and improvement in their functioning. He emphasised that the NHRC is working closely with civil society organisations, special rapporteurs, and human rights defenders to monitor and advocate for elderly rights. He also mentioned how NHRC makes interventions through advisories and recommendations to government and para-statal organisations on various human rights issues.

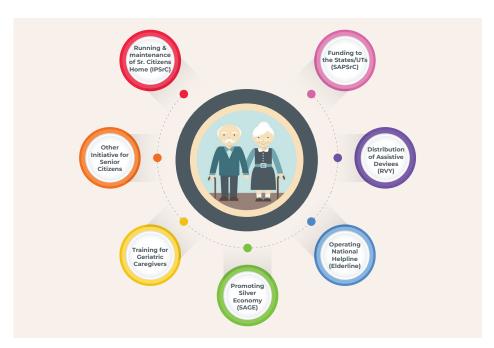


Figure 1: Components of the Atal Vayo Abhyudaya Yojana (AVYAY)

Session I – Health and Nutritional Needs of the Elderly

The first session was chaired **by Dr. V. K. Paul, Member (Health), NITI Aayog,** who expressed appreciation for NHRC's ongoing initiatives on the subject of rights of elderly persons. The session saw representatives from various ministries, the health sector, academia, and civil society.

Dr. K. Madan Gopal, Advisor, National Health System Resource Centre, opened the discussion by highlighting the post-retirement challenges faced by many elderly individuals as they become vulnerable to financial and emotional distress. A significant barrier stems from their reluctance to accept monetary support from their children. Dr. Gopal pointed towards the increasing isolation senior citizens faced, stressing the need for targeted interventions. He urged for culturally sensitive policies tailored to India's unique societal framework. He also advocated for thoughtfully adapting relevant lessons from international experiences to enrich policy decisions.



Dr. Madan Gopal, Advisor, National Health System Resource Centre, called for the creation of an integrated National Plan for Elderly Care

Dr. Gopal also identified critical gaps in existing national schemes, particularly in the management of chronic diseases and the financial burdens they impose on the elderly. He emphasised the urgent need to support caregivers, particularly those providing care at the household level, by developing accessible and comprehensive treatment packages across the country. Further, he proposed leveraging technology to empower senior citizens, with a special focus on elderly women, who are often disproportionately affected by technological exclusion. He advocated for digital literacy and the use of technological interventions to improve care delivery and enhance the quality of life for this demographic.



Mr. Sanjay Wadhwa, Professor and Head of Department of Physical Medicine and Rehabilitation, AIIMS, emphasised the importance of rehabilitative care

Dr. Sanjay Wadhwa, Professor and Head of the Department of Physical Medicine and Rehabilitation at AIIMS, stressed on the need for strengthening the component of rehabilitative care in various programmes, which often takes a backseat to other care components. He expanded on the critical role of rehabilitative care, given the high incidence of locomotor and functional disabilities amongst elderly persons. Dr. Wadhwa shared that rehabilitation professionals often seem to lack adequate knowledge about the care requirements of elderly.

To increase awareness about rehabilitative care, Dr. Wadhwa's suggestion was to tap into the expertise of professionals from the National Academy of Medical Sciences, a renowned body in the country. He suggested that experts from the National Academy of Medical Sciences could play a pivotal role in fostering dialogue and raising awareness on these issues across the country. Dr. Wadhwa also noted that the establishment of 22 new AIIMS presents an opportunity to engage these institutions in awareness-building initiatives. He proposed that these centers submit quarterly progress reports to track advancements and ensure sustained efforts in addressing the rehabilitation needs of the elderly.

Mr. C. K. Mishra, Former Secretary of the Ministry of Health and Family Welfare, emphasised the need for a transformative shift in policy, mindset, and approach towards elderly care in India. Mr. Mishra advocated for the creation of an integrated National Plan on Elderly Care in contrast to the current fragmented policy framework involving multiple ministries and bodies. It was necessary to attribute adequate resources, proper planning and implementation. Mr. Mishra advocated that care moves away from treating the elderly based on singular illnesses, towards comprehensive geriatric care.

A key issue discussed was the economic reliance of the elderly on their families. This reliance will only increase, accompanied by significant out-of-pocket expenses. Mr. Mishra pointed out that this issue is



Mr. C. K. Mishra, Former Secretary of the Ministry of Health and Family Welfare, called for assessing the real impact of existing initiatives

particularly pronounced in urban areas, where the prevalence of nuclear families often leaves elderly individuals living alone, highlighting the pressing need for well-structured and alternative care systems. Altogether, there is a need to reduce their dependence on family structures.

He pointed to successful models in countries such as Japan, Singapore, Thailand, Vietnam, and China, which have effectively tackled issues of morbidity, dependency, nutrition, and elder care, urging India to adapt these solutions to its unique needs and circumstances. Importantly, he argued that the focus should not merely be on introducing new schemes but on assessing the real impact of existing initiatives. He concluded by calling for efforts to leverage the "silver dividend," ensuring that elderly care becomes a well-planned, impactful, and inclusive part of national development.

Prof. Rama Baru, former professor at Jawaharlal Nehru University, highlighted three critical elements: pensions, healthcare, and social care, which must work in tandem to ensure comprehensive support



Ms. Rama Baru, former Professor, JNU, spoke about models of training and skilling of caregivers

for senior citizens. With regards to financial support and security, Prof. Baru emphasised the need to evaluate the depth, scope, and effectiveness of existing pension schemes in the country. She highlighted a significant gap in coverage, particularly for the vast and diverse middle segment of the population in India, which remains excluded from any form of pension support.

Prof. Baru also spoke about the importance of looking at elderly care as a component of the life course approach. Health concerns across age groups within the elderly, multimorbidity, disability and mental health should be attributed utmost attention. She iterated that the existing health system works in a siloed manner, and bringing coordination across public, private, and the nonprofit sector can help close many gaps.

For effective caregiving, skilling, reskilling, and orientation about rehabilitative care should be provided not just to medical professionals, but also to family and community level caregivers.

Ms. Baru also quoted certain innovative models during the seminar:

- An innovative programme from Hong Kong, where family members are trained to care for elderly relatives, as a model worth studying.
- Practices in Shanghai, where mixed communities are common, and old-age homes are integrated within local neighbourhoods to enhance inclusion.

 Citing Shanghai's integration of such care into its primary healthcare system, she suggested that India could adopt a similar approach by training older women as caregivers and providing them with paid opportunities, thereby addressing caregiving needs and creating more communitybased models.



Dr. Tanuja Nesari, Former Director of the All India Institute of Ayurveda, spoke about preventive strengths of Ayurveda

Dr. Tanuja Nesari, Former Director of the All India Institute of Ayurveda, emphasised the significant role of Ayurveda in elderly care, advocating for the promotion of healthy ageing and the prevention of age-related illnesses. She shared that a separate branch of knowledge 'Jara' (means ageing) that exists in Ayurveda sciences can be incorporated into existing policies and programmes. She said that the strength of Ayurveda lies in its ability to help in prevention and precaution.

Dr. Nesari said integration of ayurvedic practices in diet and lifestyle in middle ages can help reduce the incidence of age-related illnesses. She also spoke about the importance of bringing back simpler interventions into daily lifestyles to boost immunity, for example, consumption of amla (Indian gooseberry) and Chyawanprash.

She also noted that the Ministry of AYUSH is in the process of developing comprehensive guidelines on geriatric care. Additionally, she called for the integration of public-private partnerships to ensure holistic and sustainable approaches to elderly care. **Dr. K. Srinath Reddy, Former President of the Public Health Foundation of India,** highlighted that many existing schemes and programs for elderly care are fragmented and require an overarching perspective to achieve greater coherence. He emphasised the need to shift "from silos to synergy," involving local bodies and communities in the effective implementation of schemes. Strengthening primary healthcare and developing home-based care systems for the elderly were identified as critical priorities, supported by multilayered, multi-skilled teams at the local level.



Dr. K. Srinath Reddy, Former President of the Public Health Foundation of India, emphasised the need to shift from 'silos to synergies' in the implementation of schemes

Dr. Reddy focussed on three priority areas:

- The elderly are particularly vulnerable to noncommunicable diseases, which are often poorly treated or neglected, and therefore it is important to promote healthy ageing.
- Need to redefine "PPP" as "partnership for public purpose," broadening the concept beyond publicprivate collaborations to include partnerships within the private sector and civil society.
- Reimagining service delivery models was deemed essential, alongside addressing the challenges of caregiving. With many caregivers expected to migrate domestically and internationally in the coming years, he stressed the need to equip them with adequate skills and ensure the protection of their rights.



Mr. Manohar Lal Baharani, Member, All India Senior Citizens Association, called for greater collaboration between youth and the elderly **Mr. Manohar Lal Baharani, Member, All India Senior Citizens Association,** focused on the diverse circumstances of senior citizens in India, ranging from those living on charity to those relying on pensions or their own earnings. He proposed three key recommendations to enhance elderly care in the country.

First, he suggested fostering collaboration between youth (30%) and the elderly (70%) in programme design and implementation, to create synergistic outcomes. Second, he recommended that NITI Aayog and the Ministry of Corporate Affairs actively leverage CSR funding to develop and support elderly care initiatives. Lastly, he emphasised the need to introduce specialised courses on elderly care in premier educational institutions such as IITs and IIMs, similar to the programmes currently being offered by the National Institute of Social Defence (NISD).



A cross-section of the participants at the seminar

Key takeaways from the session, as summarised by Dr. V. K. Paul, Member (Health), NITI Aayog



Dr. V. K. Paul, Member (Health), NITI Aayog, chaired the session on 'Health and nutritional needs of the elderly'

- Need to define a comprehensive package of services tailored to the health and nutritional needs of the elderly. This should encompass diverse aspects, including adult vaccination, rehabilitative care, mental health, amongst other services.
- Health and nutrition needs of elderly women, who are relatively more vulnerable, should be given special attention. Efforts should be made to ensure greater health insurance coverage for the elderly.
- To adequately care for the elderly, it is of utmost importance to enable families with the skills and resources to take care of the elderly. The society, including the young and old, should be prepared to take care of older persons.

- Primary health care infrastructure, specifically Ayushman Arogya Mandirs, should be utilised to bring care closer to the homes of older people, by equipping them with necessary resources and capacity.
- While training in geriatric medicine holds immense importance, family medicine can play a transformatory role in comprehensive care delivery.
- It is necessary to explore partnerships with the private sector to make elderly care affordable and sustainable.
- Analysis and learnings from global best practices can play an important role in informing India's approach.

Session II – Economic Security, Social Inclusion and Quality of Life

The second session was chaired by Mr. Amit Yadav, Secretary, Ministry of Social Justice and Empowerment. Mr. Amit Yadav opened the session by stressing the urgent need for ensuring ageing with dignity. He referenced constitutional provisions, particularly Article 47, which addresses aspects of ageing, underscoring the responsibility to improve the welfare of the elderly. He called for a collaborative approach among all stakeholders to enhance the quality of life for senior citizens and emphasised the importance of raising awareness on this critical issue. Additionally, he highlighted the Ministry's Senior-care Ageing Growth Engine (SAGE) scheme, which encourages innovation in elderly welfare by supporting startups focused on creating products, services, and solutions tailored to the needs of the elderly. He urged further efforts in driving such innovations to address the challenges faced by older generations. The session saw representatives from different state departments, non profit sectors, international organisations, and more.



(Left to right) Mr. Bharat Lal, Secretary General, NHRC, Mr. Amit Yadav, Secretary, Ministry of Social Justice and Empowerment, and Mr. Devendra Kumar Nim, Joint Secretary, NHRC

Kerala's leadership in elder-friendly policy

Mr. Puneet Kumar, Additional Chief Secretary, **Government of Kerala, Social Justice Department,** joined the seminar online and spoke about Kerala's leadership in the elderly care domain as Kerala was the first Indian state to introduce a policy for senior citizens in 2013. The policy focuses on objectives such as social security, improved healthcare, and enhanced community participation. The state has placed great emphasis on building age-friendly infrastructure and raising awareness about elderly needs through media campaigns. Through its initiatives for lifelong learning and flexible retirement, the state fosters a silver economy. The underlying ideology

"We have focussed on supporting active ageing, lifelong learning, health promotion, flexible retirement, and intergenerational solidarity."

- Mr. Puneet Kumar

emphasises positive representation of elderly in the society rather than just moving them into old age or care homes.



Mr. Puneet Kumar, Additional Chief Secretary, Government of Kerala, Social Justice Department, spoke about Kerala's elderly-friendly policies in practice

Mr. Kumar also shared that Kerala is developing an Aadhaar-linked electronic fragility index, inspired by the UK's system. The state has allocated 5% of the budget to palliative care. The state also has various accountability and privacy frameworks in place to safeguard the autonomy of senior citizens.

A remarkable outcome of these efforts is Kochi's recognition as an age-friendly city by the World Health Organisation. The city's implementation of age-friendly practices has helped address key challenges such as limited infrastructure, social isolation, and budget constraints. He underlined how Kochi's participatory and adaptable approach serves as a blueprint for other cities to follow.

Challenges faced in Kochi:

- Urban Infrastructure Limitations: Many areas lacked age-friendly features like wheelchairaccessible footpaths and buildings, with additional mobility challenges from drainage issues and flooding.
- Social Isolation: The trend of nuclear families and migration left many seniors isolated, affecting their mental health and community engagement.
- Limited Awareness: There was initially low public awareness regarding the specific needs of older adults, and age-friendly urban designs were not prioritised.

 Budget Constraints: Competing priorities like waste management and traffic congestion required significant investments, making it difficult to allocate sufficient funds for age-friendly initiatives.

Solutions and strategies:

- Infrastructure Upgrades: Streets were redesigned with ramps, handrails, and tactile paving for better mobility. Public spaces like parks were adapted with exercise zones and senior-friendly seating.
- Health and Well-being: Senior-focused health camps and wellness centers were established, with partnerships ensuring affordable healthcare access.
- Social Integration: Initiatives like community centers and hobby clubs helped seniors remain socially active, while cultural events and volunteering programs allowed them to share their knowledge with younger generations.
- Technology Adoption: Age-friendly apps, smart city projects, and digital literacy workshops helped seniors engage with technology for better communication and access to services.
- Policy Support: The Kerala government and Kochi Municipal Corporation incorporated age-friendly policies into broader urban development plans, with global collaborations for technical expertise and funding.

Ms. Uma Devi, Joint Director, Social Justice Department, Tamil Nadu, also spoke during the session, highlighting Tamil Nadu's initiatives to support its elderly population (See Figure 2). She highlighted that government hospitals and primary health centres across the state now have separate geriatric wards, dedicated beds, and separate queues for senior citizens easing the overall healthcare experience. Ms. Devi mentioned that the state has established geriatric units in Government College Hospitals and is planning their further expansion.

Ms. Devi additionally noted the state's pioneering initiatives, including India's first Post Graduate Programme in Geriatrics (M.D.) at Madras Medical College. She stated that Tamil Nadu supports 133 old age homes that house 5,787 residents and has implemented a pneumonia vaccine programme (PREVNAR-13), which has already benefited 4,133 people. She also mentioned an innovative skilling effort launched by the Tamil Nadu Skill Development Corporation, which trained 8,430 women as Home Health Aides and 1,980 as Geriatric Assistants, addressing both job creation and elder care. Ms. Devi also discussed how digital technologies, such as the online registration system for old age homes, the Elder Helpline (14567), and the Senior Citizen mobile app, have improved access to key services, resulting in a more inclusive and supportive environment for the elderly.



Ms. Uma Devi, Joint Director, Social Justice Department, Tamil Nadu, spoke about key schemes to support the elderly in Tamil Nadu

Insights and experiences from across nations

Ms. Kajari Biswas, Senior Director, Ministry of External Affairs, emphasised India's active participation in global frameworks focused at elderly care, such as the Madrid International Plan of Action on Ageing and the United Nations Principles for Older Persons. She underlined India's commitment to aligning its policies with global standards.

Ms. Biswas pointed out that countries worldwide are adopting innovative solutions to cope with the ageing population. In response to a shrinking workforce, nations such as France, Japan, and Singapore have raised retirement ages and introduced policies to re-employ older workers. Canada provides phased retirement, which allows older workers to reduce hours while preserving income. Simultaneously, several countries have initiated programs that focus on lifelong learning and skills development, aimed at enhancing productivity and continued economic participation.



Ms. Kajari Biswas, Senior Director, Ministry of External Affairs, highlighted solutions adopted in various countries to cope with an ageing population

Socially, many countries are creating environments that help seniors age in place, fostering intergenerational bonds, and supporting caregivers, such as through respite care services. For example, Singapore has incentivised housing for families living with elderly relatives, and Japan offers low-interest loans to help families make home renovations to accommodate the elderly. Healthcare systems are also evolving to meet the needs of older populations with integrated care, long-term care insurance, and e-health innovations.

Ms. Biswas concluded by stressing the need for a multi-dimensional approach to support the elderly, including economic and social reforms, healthcare improvements, and policy development. She called for increased diplomatic dialogue between India and other nations to share best practices and implement solutions that ensure older adults age with dignity and actively contribute to society.

Ms. Anupama Dutta from Helpage India emphasised crucial areas for improving older well-being in India, including economic security, social ties, healthcare, and preventive measures.

 She emphasised the need to boost social pensions, pointing out that some states currently provide pensions as low as Rs 200 per month. She advocated for a minimum pension of Rs. 1200 per month to prevent elderly exploitation and suffering. Improving social security can allow them to live with dignity.

- Ms. Dutta also additionally called for age-friendly urban environments to prevent exclusion, citing inclusive smart city infrastructure and accessible public places.
- On healthcare, she advocated for increased access, particularly for women aged 50 to 60, and suggested extending preventive measures such as frequent testing for chronic illnesses.
- Taxing "sin goods" was considered as a method of encouraging healthier lifestyles.
- Finally, she urged for the expansion of multifacility childcare centres, such as those found in Kerala, to give social, medical, and recreational services to the elderly. These facilities can help elders stay active and involved while easing the caregiving burden on families.



Ms. Anupama Dutta from Helpage India advocated for better healthcare access for older women

Ms. Pavithra Reddy, CEO of Vayah Vikas, presented innovative solutions to the challenges that elderly adults in India experience, with a focus on integrated support, empowerment, and healthy ageing. She advocated for a comprehensive program that combines all existing aged care plans to improve access and remove bureaucratic barriers.

To address in-house abuse, Ms. Reddy called for robust social and legal support systems, including helplines, counselling, and legal aid for victims. She emphasised the importance of community-based awareness efforts to promote elder respect, as well as the creation of safe places and intervention mechanisms to protect their safety and dignity.



Ms. Pavithra Reddy, CEO, Vayah Vikas, called for development of healthy ageing programmes for the elderly

Ms. Reddy also placed emphasis on healthy ageing programmes that cater to the different requirements of elders. She proposed including physical activities, nutrition, mental wellness, and preventative healthcare into these projects to improve mobility, balance, and overall well-being. Such comprehensive programs, she said, will assist older persons live satisfying lives while lowering their risk of chronic diseases.

Mr. Asheesh Gupta, Co-Founder of Samarth Elderly Care, outlined several strategies to improve the life of elderly in India. He emphasised on the importance of preventive care to allow for early detection. He also suggested promoting healthy ageing by encouraging balanced nutrition, physical activity, mental stimulation, and social interaction.

Mr. Gupta also emphasised the need for increased data transparency, stating that the current "silver index" is insufficient. An extensive data system is required to benchmark the elderly's demands and evaluate the performance of policies and activities. Furthermore, capacity building through reskilling and lifelong learning courses is critical for empowering elders to live independently and have an active lifestyle.

Gupta also called for the formalisation of caring as a profession. He emphasised the need for care training, recognition, and fair remuneration in attracting qualified workers and providing great care to the elderly. Furthermore, he urged firms to devote a



Mr. Asheesh Gupta, Co-Founder of Samarth Elderly Care, spoke about preventive and promotive strategies to enable healthy ageing

higher portion of their corporate social responsibility (CSR) funds—currently 0.2%—to elderly care projects.

Dr. G.P. Bhagat, Founder of Saint Hardyal Educational and Orphans' Welfare Society (SHEOWS), emphasised on honouring and appreciating the contributions of younger senior citizens who devote both their resources and time to helping the elderly. Dr. Bhagat underlined that formally recognising their achievements would not only validate their work, but would also motivate other elders to play an active role in improving the welfare of older generations.

Dr. Bhagat also emphasised the importance of bridging the gap between theoretical knowledge and practical applications in geriatric care. While rehabilitation and care services are necessary, they must be supplemented by hands-on training to ensure that carers can properly handle the complex needs of the elderly.



Dr. G. P. Bhagat, founder of SHEOWS, called for interventions that motivate elders to play an active role in welfare measures

Ms. Manjari Chaturvedi, Representative, Healthy Ageing India, spoke about her organisation's initiatives aimed at reintegrating the elderly into the society. The non-profit organisation, Healthy Ageing India, even provides basic medical care for senior citizens who have been abandoned, and are currently living in nearly 25-27 old age homes in Delhi NCR.



Ms. Manjari Chaturvedi, Representative, Healthy Ageing India, shared about Healthy Ageing India's intergenerational learning centres operational in Jharkhand

Ms. Chaturvedi also spoke about an innovative effort of the organisation, which has been to create intergenerational learning centres, started by Dr. Prasun Chaterjee, the founder of Healthy Ageing India. The first such centre, she mentioned, was started in a government school in Noida, where elderly were brought together, provided training, and simultaneously connected with children aged between 10 and 13 years, belonging to government schools. In addition to teaching students on different subjects, the elderly also mentored and guided these children. The programme was also replicated in 10 schools of Delhi, but was cut short due to the pandemic. The model is now operational in Ranchi and Dhanbad in Jharkhand, where elderly educators are teaching tribal children under this initiative.

Ms. Malti Jaswal, Co-Founder of the Inspiring Seniors Foundation, also submitted her recommendations at the seminar. She focussed on the importance of providing meaningful engagement opportunities to the elderly and increasing their workforce participation. She mentioned that the same can be done by establishing a database of senior citizens, as a sub-set of Aadhaar, part of India's Digital Public Infrastructure. This can help collate information on socio-economic status, education levels, interest areas, willingness to volunteer, intern or learn, and more.

Figure 2: Building Pillars of Elderly Welfare Programmes in Tamil Nadu

Financial	Healthy	Social	Safety and	Enabling
Security	ageing	Inclusion	legal support	Environment
 Provision of enhanced OAP 	 Health Insurance – CMCHIS Separate Geriatric ward for elderly Makkalai Thedi Marruththvam 	 Different types of Old Age Homes – Intergenerati onal bonding Celebration of days Special homes for rescued elderly in 7 spiritual places 	 MWPSC Act, 2007 State Policy on Senior Citizen Free Legal aid Elders Helpline Senior Citizen Mobile App 	 Free bus travel for Senior Citizens. Certificate course for home based care for elderly

Key takeaways from the session, as summarised by Mr. Amit Yadav, Secretary, Ministry of Social Justice and Empowerment



Mr. Amit Yadav, Secretary, Ministry of Social Justice and Empowerment chaired the session on 'Economic security, social inclusion and quality of life'

- Emphasis on ageing in place, i.e., enabling the elderly individuals to age at their homes and communities, surrounded by familiar persons and social networks.
- Supporting caregivers, both family and professional personnel, through training, counselling, financial incentives, and respite care services, can help ease the society into the concept of ageing in place.
- Promoting financial literacy can help empower the elderly by helping them manage their savings, pensions, and investments wisely, and prevent financial insecurity, exploitation, and other forms of financial abuse or dependency.
- Developing urban and rural spaces that are inclusive and accessible for elderly individuals is of utmost importance.

- Encouraging collaborations between governments, non-profit organisations, and private enterprises can create collective action to cater to the diverse needs of senior citizens.
- It is also important to establish platforms that amplify the voices of senior citizens in policymaking. This can include forming dedicated lobbying groups that focus on advocating for issues like healthcare, pensions, and accessibility.
- Encouraging innovation can help create solutions tailored to the needs of elderly populations, such as assistive technologies, smart home devices, and telemedicine platforms.
- Need to build a robust senior care economy that nurtures industries catering to the growing ageing population, including specialised healthcare, elder-friendly tourism, and recreational activities.

Concluding remarks by Mr. Bharat Lal, Secretary General, National Human Rights Commission

The seminar concluded with remarks by Mr. Bharat Lal, Secretary General, NHRC. He stated that the NHRC attributes special attention towards improving the quality of life of people, particularly those from disadvantaged and vulnerable communities. The Commission's activities are aimed at fostering synergies across public, business, and civil society organisations in order to increase collective impact.

Mr. Lal highlighted that the recommendations

and insights gathered during this discussion could significantly contribute to drafting the new policy on older persons currently underway at the Ministry of Social Justice and Empowerment (MoSJE). He also proposed the creation of an Uber-like platform to maintain a database of able and willing seniors who can engage in economic and voluntary activities. Such an initiative could enable older adults to contribute their skills and experience meaningfully while fostering their social and economic inclusion.



Mr. Bharat Lal, Secretary General, NHRC, delivered the concluding remarks

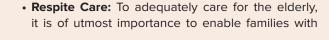
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Actionable Solutions Summary of Recommendations from the Seminar

- Comprehensive healthcare service package for the elderly: There is a need to define a comprehensive package of services at the primary health Center tailored to the health and nutritional needs of the elderly. This should integrate prevention, adult vaccinations, early detection, management and rehabilitative care. Special attention should be given to address mental health and needs of elderly women who are relatively more vulnerable and would require specialised health services.
- Nutrition: Expand Poshan Abhiyan for senior citizens through programs like mid-day meal schemes and community kitchens to address the nutritional needs. In addition, frame dietary guidelines specifically to meet the unique nutritional needs of older adults and ensure access to essential food supplements and vitamins.
- **Digital Health:** Expand the use of digital health tools to provide cost-effective, remote healthcare services, improving accessibility for seniors in rural or isolated areas.
- Health Insurance: Implement insurance schemes

for all seniors over 60 to reduce catastrophic healthcare costs and ensure broader access to medical services.

- Healthcare Workforce Training: Shift healthcare approaches to person-centered models, training multidisciplinary teams in geriatric and palliative care to address the complex needs of older adults. Services of family care physicians can also be leveraged to address gaps in geriatric care.
- Assistive Devices: Improve access to assistive devices for seniors, addressing visual, hearing, and mobility impairments to improve quality of life and to facilitate social engagement.
- Long-Term and Palliative Care: Expand homebased and long-term care services, including palliative care, to manage chronic conditions and improve the quality of life for older adults. Measures to bring healthcare closer to the communities they serve, via mobile medical units, will help in addressing assessed issues.





A cross-section of the audience

the skills and resources to take care of the elderly. The society, including the young and old, should be prepared to take care of older persons. The establishment of respite care services to support primary caregivers, reduce stress and burnout, and ensure adequate caregiver rights through proper regulation is required.

- Pension Support: Enhance financial support for seniors below the poverty line, streamline eligibility processes, and improve awareness of existing pension schemes. It is recommended that the pension amount be increased to at least 1200 rupees per month. Measures to expand contributory pension to the unorganised sector was suggested.
- Workforce Participation/Meaningful Engagement: Establish a data base of senior citizens, as a sub-set of Aadhaar, as part of Digital Public Infrastructure, capturing senior citizens' socio-economic status, education, interests, willingness to volunteer, intern or learn etc. Further facilitate collaboration with organisations seeking experienced senior citizens for employment, mentorship, or volunteering opportunities, creating pathways for lifelong learning and supplemental income for seniors. The database would also facilitate research, longitudinal

studies, inform policy making and need-based interventions.

- Building Age-Friendly Environments: Need to rethink the built environment. From accessible housing to public spaces, we need to ensure that older adults can live in environments that promote dignity, independence, and active participation in society. Invest in accessible public spaces, transportation, and housing for seniors to promote independence and reduce social isolation. In addition, create community-based recreational activities and volunteer opportunities to foster social interaction and engagement, ensuring safety through law enforcement initiatives.
- Protection Against Financial Fraud: Improve digital literacy through targeted training programs to protect seniors from financial fraud. Expand digital literacy programs like E-DISHA to include older adults.
- **Combating Ageism:** One critical issue we must address is the persistent stereotyping of older adults. These stereotypes can limit their opportunities for employment, social engagement, and overall wellbeing. A shift in mindset is required, where older people are seen as valuable contributors to society.



Participants sharing their views during the seminar

List of Participants

S.No.	Name	Organisation & Designation				
	Government Representatives					
1.	Dr. V. K. Paul	Member (Health), NITI Aayog				
2.	Mr. Bharat Lal	Secretary General, NHRC				
3.	Mr. Amit Yadav	Secretary, M/o Social Justice and Empowerment				
4.	Mr. Puneet Kumar	Additional Secretary, Social Justice Department, Kerala				
5.	Mr. Devendra Kumar Nim	Joint Secretary, NHRC				
6.	Ms. Monali P. Dhakate	Joint Secretary, M/o Social Justice and Empowerment				
7.	Dr. K. Madan Gopal	Advisor and Head, Public health administration, NHSRC				
8.	Ms. Kajari Biswas	Senior Director, Ministry of External Affairs				
9.	Ms. Uma Devi	Joint Director, Social Justice Department, Tamil Nadu				
10.	Prof. Tanuja Naseri	Former Director, All India Institute of Ayurveda				
11.	Dr. Sudha Goel	NITI Aayog				
12.	Ms. Jyoti Rathee	M/o Social Justice and Empowerment				
13.	Mr. Praveen Sharma	M/o Social Justice and Empowerment				
		Health/ Medical				
14.	Dr. Sanjay Wadhwa	Professor, Department of Physical Medicine and Rehabilitation, AIIMS				
15.	Dr. Amrita Kansal	Technical Officer, Healthy Ageing, WHO				
16.	Mr. Rajit Mehta	Max India				
		Academician				
17.	Dr. K. Srinath Reddy	Former Present, Public Health Foundation of India				
18.	Prof. Rama Baru	Former Professor, JNU				
19.	Prof. Mala K. Shankardass	Former Professor, Delhi School Of Economics				
20.	Prof. Aasha Kapur Mehta	Chairperson, Centre for Gender Studies, Institute of Human Development				
Former Civil Services						
21.	Mr. C. K. Mishra	Former Secretary, Ministry of Health and Family Welfare				
22.	Dr. Manohar Agnani	Former Additional Secretary, MoHFW				
	Int	ernational Organisations				
23.	Mr. Harsh Kothari	World Bank				
24.	Mr. Sanjay Kumar	UNFPA				
25.	Mr. Jaydeep Biswas	UNFPA				
26.	Dr. Deepti Agrawal	WHO				
NGO Sector						
27.	Ms. Anupama Dutta	Senior Policy Advisor, Helpage India				
28.	Ms. Malti Jaswal	Founder, Inspiring Seniors Foundations				
29.	Ms. Rekha Mody	Founder, Stree Shakti				
30.	Mr. Manohar Lal Baharani	All India Senior Citizen Forum				

31.	Ms. Pavithra Reddy	CEO, Vayah Vikas		
32.	Dr. Manjari Chaturvedi	CEO, Healthy Ageing India		
33.	Dr. G. P. Bhagat	Founder, SHEOWS		
34.	Mr. Amar Nawkar	Tata Trust		
35.	Mr. Syed Askari	Pallium India		
36.	Dr. Preeti Chauhan	Pallium India		
37.	Ms. Sharati Roy	IWWAGE		
38.	Mr. Sayak Sinha	IWWAGE		
39.	Dr. Benazir Patil	CEO, SCHOOL		
40.	Dr. Pawan Pathak	Director, SCHOOL		
41.	Dr. Abha Chawdhary	ANUGRAHA		
Private Sector				
42.	Mr. Piyush Kumar	Khyaal App		
43.	Mr. Asheesh Gupta	Samarth Elderly Care		
44.	Mr. Vibhor Mago	EPOCH Eldercare		
45.	Ms. Neha Sinha	EPOCH Elder Care		
46.	Ms. Shobha Suri	ORF		
47.	Dr. Vijay Rhayakar	CEO, Athashri Projects		
Organisers				
48.	Dr. Abha Jaiswal	Visiting Fellow, Sankala Foundation		
49.	Ms. Deepna Kaveriappa	Consultant, Sankala Foundation		
50.	Ms. Palak Chakraborty	Research Associate, Sankala Foundation		
51.	Ms. Ishani Nangia	Communications and Outreach Associate		
52.	Mr. Shikhar Mohan	Photographer, Sankala Foundation		
53.	Ms. Ahana Ray	Junior Research Consultant, NHRC		
54.	Ms. Madhura Naniwadekar	Junior Research Consultant, NHRC		
55.	Ms. Swarna Singh	Junior Research Consultant, NHRC		



"To adequately care for the elderly, it is of utmost importance to enable families with the skills and resources to take care of the elderly. The society, including the young and old, should be prepared to take care of older persons."

- Dr. V. K. Paul

Member (Health), NITI Aayog







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