Social Security- Policy Initiatives for Elderly in India

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With the proportion of people above 60 years of age, crossing seven percent of the total population, India will soon be joining the list of Aged Countries. Given the socio-economic structure, and being the second most populous country in the world, the process of demographic transition in India, would be different from that of the developed world. The article attempts to analyze the multifarious effects of ageing and probe the implications of the ageing process on the social and economic lives of people in 21st century, with the changing family ties, inter-generational gap in India and the need for policy-formation to provide security, health care and right to maintenance for aged.

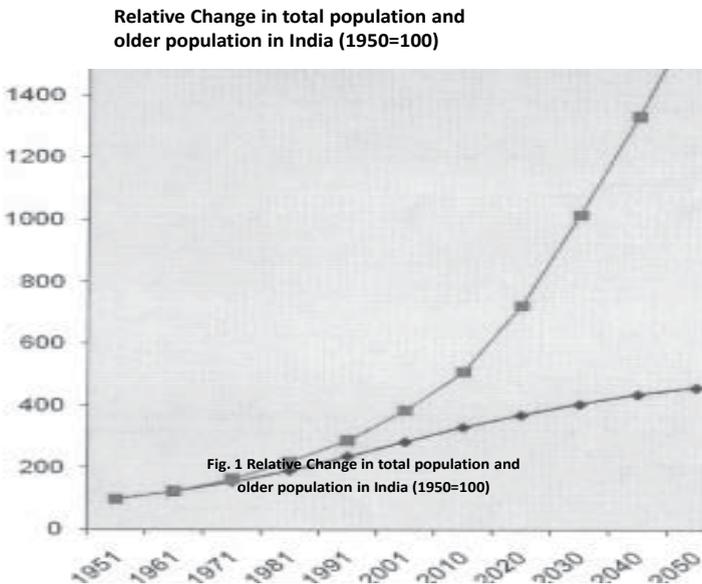*[Keywords- Old age, Retirement, Care Givers, Security, Coping, Policy]*

Ageing is a part of our life cycle. Although it has become an issue of concern in recent years, as such the number of elderly persons, both relative and absolute, are increasing all-over the world and India is not an exception to this demographic reality. The advancement in medical sciences has been responsible for increase in life expectancy and decrease in mortality rate. The average life span of an individual has risen from 32 years to 65 years and even beyond. According to International demographic standards, a population is considered to be young, if up to 4% of people are over 65 years, mature when the proportion is between 4 % to 7% and ageing when it is higher than that. It is followed that India has reached the third stage i.e. the population is heading towards ageing.

The definition of the term 'elderly' or 'aged' varies from society to society. Ancient Chinese scholars delineate seven phases

in a man's life, and Pythagoras in the sixth century B.C compared human life to the seasons. In both the cases old age was deemed to be beyond 60 years. After reaching this age, a person is addressed by younger persons with special terms of respect, equivalent of the kinship terms grandfather or grandmother. The census (of India) uses 60 years as a cut-off point to classify people as old. For purposes of being eligible for old age pension (OAP) most of the states in India have laid down 65 years as the minimum age, while in few states age limit is fixed at 60 years.

The ageing of the population in India has been steadily increasing from 5.6% to 7.9%   during 1960-2005 and the growth rate among different cohorts of elderly such as 60 plus, 70 plus and 80 plus is much higher. As per the projections, the number of older persons is estimated to progressively increase to 8.3% (94.8mio) by 2011, 9.3% (118mio) by 2016, 10.7% (143.7mio) by 2021 and 12.4% (173.1mio) by 2026. Thus there will be substantial increase of older persons in absolute numbers, especially in countries like China and India. Therefore, the developing world will see the 'rapidity' of ageing.

(Fig. 1)

Relative Change in total population and older population in India (1950=100)

Fig. 1 Relative Change in total population and older population in India (1950=100)

This has serious implications in terms of how the future elderly – more particularly the elderly poor - will survive. The UN

has put Africa, Asia, China and India in Group II countries, which had 32.9% young population and aged were 8% in 2000A.D but by 2075 the young are going to be 19.1% while the aged will be 24.2% of the total. The developed world has already adopted affordable and efficient   policy responses (Krishnan, P and Mahadevan K (ed.) 2008). In this context, it is important for developing countries, to have the outlines of a National program to understand and help the elderly population (National Policy on Ageing, Government of India. 2010).

Social and Economic Implications of Ageing:

Old age designates the last stage and thus has to be understood as a continually renegotiated social construction. It is distinguished as a specific stage of life, and delimited chronologically, with the result of a sharp tripartite division of the life cycle into a phase of preparation, followed by the one of productive activity in income generating terms, and finally the stage of retirement. It is a new phenomenon which was earlier used in European Economy, as a form of transfer of land to the heir. Today retirement is emerging as 'Institutionalization of life course'.

(Fig. 2)

Age Pyramids of India
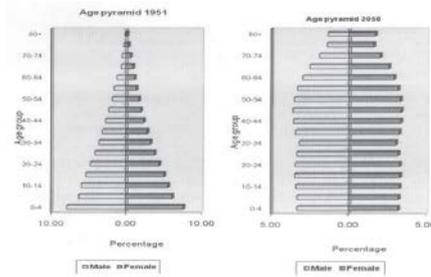
Source: Devi, R.D. (1998) p 73-74

In many countries, it is closely related to their position in the labor market; thus persons on their retirement are regarded as elderly (Ghosh, Rajarshi (ed.):2005). Official definition s of the elderly

refers to people of post- productive age that is retirement age. The collective definition of the elderly is based on three criteria:

a) Retired from work and drawing a pension

b) Looking old

c) Having some limitation in activities of daily living

The chorological criterion for classifying an individual or collectively as "old" is generally employed for administrative purposes- pensions, insurances, and the like large It does not cover large number of men and women who do not retire at a formal age nor those who are engaged in unorganized sector. Thus categorization is difficult to apply in the Indian context, as majority of elderly women in India do not know their chronological age and very few elderly women are employed in the formal sector. Even the majority of a population whose activities are confined to the urban informal sector or to the rural agricultural sector, work activity continues until extremely advanced ages when they are disabled and can no longer work. It is therefore necessary to have realistic and meaningful measures that reflect the local communities 'perception of the ageing process.

Problems of the elderly

Given the trend of population ageing in the country, the older face number of problems and adjusts to them in varying degrees. These problems range from absence of ensured and sufficient income to support themselves and their dependents to ill-health, absence of social security, loss of social role and recognition and to the non-availability of opportunities for creative use of free time. The needs and problems of the elderly vary significantly according to their age, socio-economic status, health, living status etc. Most people enter old age without understanding of the problems; they face challenges during the grey years of their life. There is a saying that 'you are as old as you look; you are as old as you feel, and you are as old as you are'. However, some find "old age as a period with no gains and only pains (Ponnuswami, Ilango, ARFI)." In the present scenario, old age population is at great risk because of depression, loneliness, anxiety and frustration. They need peace, family support, life satisfaction and counseling. The aged evolve strategies of personal adjustments, which enable them to avoid emotional disturbing situations. Aged in India are today

contributing to the service sector in the family – as being household workers, child-caring or both, in order to feel useful to the family.

Carson conceptualized three interaction levels of coping, helpful in overcoming problematic phases of life;

- On biological level, there are immunological defenses and damage repair mechanism;
- On the psychological and interpersonal level, there are learned coping patterns, self-defenses and support from family and friends;
- On the socio-cultural level, there are group resources such as religion. People who visit religious places have chances of being healthy; it gives an opportunity to interact with similar persons, friends, giving them psychological satisfaction which contributes to physical health.

Family as a social support; in the modern times, the role of family has undergone significant changes, where the traditional joint family system is making way for nuclear family mode. Even in traditional societies of Asia, there is a visible change taking place, so far as the role and function of family is concerned. It is a key institution that provides social and economic support to individual at different stages of life. Intergenerational relationship and the role of women in the family are changing that affect the care of the aged in the family. This is a major concern for the policy makers, who are planning the welfare of the aged *(*Karnad, Sunanda.: 1986).

Industrialization with resultant urbanization has affected every aspect of traditional Indian society. Technological advancement, impact of mass media and higher degree of mobility have influenced long-established life –styles, conventional value systems and customary place of the aged and women in the society .Thus, the society is witnessing a gradual but definite withering of the joint family systems, as a result of which a section of the family, primarily the elder, are exposed to somewhat emotional neglect and a lack of physical support

Since the traditional norms and values of the Indian society laid stress on respect and care for the aged , the aged member of the family were normally taken care of in the family itself .Indian family, which has been predominantly joint or extended one, remained stable, despite marked and drastic social, political, economic, and religious changes over the last decade. It has

retained certain structural forms and traditional values. The historical cultural tradition of care and respect for the elderly within the family and the community has made the task of caring and empowering the aged relatively smooth and easy both for the society and the Government of India *(*Indira Jai,: 2004*)*. The increasing presence of older persons in the world is making people of all ages more aware that we live in a diverse and multi-generational society.

Measures to Deal with the Problems

Constitutional Provisions

The mandate enshrined in *Article 41* of the *Constitution of India* forms the basis of the tenets of the National Policy on Older Persons that appreciates the special needs of the community to adequately meet the challenges of the process of ageing. It deals with the State's role in providing social security to the aged. According to it "the state shall, within the limits of its economic capacity and development, make effective provision for securing the right to work, to education and public assistance in case of unemployment, old age, sickness and disablement, and in other cases of undeserved want."

National Policy on Older Persons (NPOP)

The Policy announced in 1999 reaffirms the commitment of the Government to ensure the well-being of the older persons in a holistic manner. Broadly, the Policy envisages:

- **Financial Security** through *Old Age Pension Scheme* for the poor & the destitute older persons, Pension Scheme for the self-employed / non-formal / non-government sector, and better returns on earnings / savings of Government / Quasi-Government employees' savings in Provident Fund etc.

- **Health Security** recognizing the special health needs of the older persons;

- **Recognizes Shelter** as a basic human need, and *provides for earmarking 10% of housing sites* in urban as well as rural areas for older persons in the of BPL, and *Indira Awas Yojna* for the destitute;

- **Educational / Information needs** by disseminating knowledge about *preparation for old age, and inter-generational bonding* concepts at School level itself;

- **Welfare & Institutional Care** providing for the State to create infrastructure in partnership with voluntary organizations for poor, destitute and neglected older persons, whose care cannot be ensured within the family.
- **Protection of Life & Property** of Older Persons envisaging *provision of free legal aid & toll-free helpline services* for the protection within Cr P C 1973 and **Hindu Adoption & Maintenance Act 1956;**
- **Human Resources Training** to care for Older Persons through introduction of *Special Courses on Geriatrics in the Medical Courses;*
- **Media help** in *identifying emerging issues as well as dispelling stereotypes & negative images* about old age.

To operationalize the NPOP, the Ministry of Social Justice & Empowerment has constituted a 39 member National Council for Older Persons (NCOP), with the specific objectives of advising the Government on these issues (Krishnan and Mahadevan: 2008).

Specific Initiatives & Available Support Services
a) Financial Initiatives
*These include Government-sponsored Schemes for **Old Age Income Security** at three levels:*
i) *Compulsory:*   Employees' Provident Fund (EPF), Employees' Pension Fund, Civil Service Pension Scheme, Government Provident Fund (GPF) & Special Provident Funds;
ii) *Voluntary, Tax Preferred:* Public Provident Fund (PPF), Superannuation Plans and Personal Pensions;
iii)*Social Assistance:* State Level Assistance, National Old Age Pension Scheme.

The National Old Age Pension Scheme (NOAPS) covers persons above the age of 65yrs and in the category of persons under BPL. The State Governments are asked to make a matching payment *or more* of Rs.200 per month per person for elderly between ages 60 & 79 and Rs.500 for those above 80, contributed by the Central Government. A total of 110.79mio elderly benefitted US $ 1bn approximately during the Tenth Five Year Plan under this Scheme.

Annapurna Scheme provides for 10kg of rice ort wheat to needy elderly covered under the NOAPS and 4.3mio elderly

benefitted US $ 56mio during the Tenth Five Year Plan under this Scheme.

Concessions / Tax Rebate / Other Incentives included 30% concession in train fare to all elderly above 60yrs of age, 45% to 50% concession in base fare by different Airlines, Income Tax Rebate of up to Rs.15000 of actual tax with a provision of up to Rs.20000 spent on medical insurance premium & up to Rs.40000 spent on medical treatment and a higher exemption from Income Tax that varies from year to year for persons older than 65yrs of age. Also banks are providing 0.5% to 1% additional interest on fixed deposits to persons above 65yrs of age, and the Government has also provided for reservation of seats for the elderly in public transport, railways & airways.

Reverse Mortgage Scheme to extract value out of their property enabling a hassle-free life was launched to secure a regular income as loan.

Pension Reforms in India *was an unresolved issue,* as the escalating cost of the pension system was making it an unsustainable social security measure. Ageing population with increased life expectancy, lower mortality rate and decreasing / volatile returns in financial markets necessitated a review of the old systems. Project OASIS Committee Report (Dec 29, 1999), IRDA Report (October 2001) and the Bhattacharya Report (Feb 2, 002), forming the basis of the long pending pension legislation, *has recently resulted in the passage of the Pension Fund Regulatory and Development Authority (PFRDA) Bill on the 5th Sep 2013(Employment News, September 23, 2013)*. The PFRDA Bill comes with some safeguards for subscribers wary of private pension fund managers (PFM), in the wake of the experience in US after the meltdown of 2008. PFMs will provide at least one Scheme offering minimum assured returns, and there will at least be one PFM from the Public Sector now and also that NPS funds cannot be invested in foreign markets. However, multiplicity of pension schemes envisaged there-under is supported most persuasively because of 88% of the workforce, all of them in the unorganized sector, have no access to old-age social security otherwise.

b) Social Initiatives& Health Security

National Social Assistance Program (NSAP) came into effect from 1995 towards the fulfillment of the Directive Principles enshrined in Articles 41 & 42 of the Constitution of India.

Integrated Program for Older Persons is being implemented by the Ministry of Social Justice & Empowerment with the objective of empowering & improving the quality of life of elderly above 60, particularly the infirm, destitute & widows, by providing financial assistance to NGOs, Autonomous Bodies, Educational Institutions & Cooperative Societies up to 90% of project cost for setting up & maintenance of Day Care Centers, Mobile Medicare Units, Old Age Homes & Non-Institutional Service Centers – US $ 18.6mio provided during the Tenth Five Year Plan.

Alma Ata Declaration of 1978, had promised health for all by the year 2000, but it is far from execution. But there has been a manifold improvement and advancement in the Indian Medication System and Health Insurance for old people has gained immense momentum. *Insurance Coverage up to 75yrs of age* under Para 36 of the NPOP envisages various Schemes, including Senior Citizens Unit Plan and Insurance Schemes for Health / Medical Claim under individual & Group Policies, which are attracting Government intervention to enforce a uniformity as regards entry age of Senior Citizens.

Also under Health Security for the elderly, separate counters / OPD & Geriatric Units in hospitals & free medical services under CGHS in Government Hospitals launched to facilitate easy accessibility to the elderly. To provide succor from debilitating diseases like Alzheimer's leading to Dementia Memory Clinics & Mental Health Programs launched to facilitate proper diagnosis & manage treatment. The Union Budget (2013-14) – provides funds for implementation of the National Program for the Health Care of the Elderly in 100 selected districts of 21 states. Eight Regional Geriatric Centers are being funded for the development of dedicated Geriatric departments *(Southern Ecponomist, April, 2013, Budget Speech)*.

The National Institute of Social Defense (NISD) under the Ministry of Social Justice & Empowerment has initiated training of *caregivers as a special initiative* on the Centenary of Alzheimer's. Also the Ministry has launched the *Project 'NICE' (National Initiative*

on Care for Elderly). NISD has also initiated a novel program of imparting Computer Literacy to the elderly to adopt new technology and benefit from IT enabled services like e-Ticketing, e-Banking, e-Business etc. Innovative Public Training, imparting information through a Single Window System, Voluntary Bureau of Elderly and Inter-Generational Bonding to bridge the gap are other initiatives by NISD. It has also developed an innovative 'do-it-yourself' publicity material like interesting cataract awareness 'wall hanging', besides other useful publications and exhibits giving latest information about schemes, concessions, rights and available services for the elderly people.

There are a number of specialized NGOs coming up to join hands with Government towards creating an elderly friendly environment in the country. These include The Senior Citizen Forums and Welfare Associations in New Delhi, Senior Citizens Councils and various *fora* like *Helpage India*, *Self-Help Groups* in Gujarat, and *Servants of People Society* in Chandigarh working for the cause of the elderly.

Legal Obligation of Children *to look after their parents in their old age* and to protect their life & property or their becoming soft targets for miscreants within and outside the family has since been legislated. As old age homes in India today, are not accepted as the only solution to the woes of the elderly the Government of India has passed *the Maintenance and Welfare of Parents and Senior Citizens Bill, 2007.*   The Bill provides for a) an appropriate mechanism to be put in place to facilitate need-based maintenance to the parents & senior citizens; b) better medical facilities; and c) institutionalization of a suitable mechanism for protection of life & property of older persons; and d) setting-up of old age homes in every district. Besides, special protective measures have also been initiated by various State Governments in collaboration with NGOs by providing *Help-line Services.*

In a nutshell Government policies help to sustain social security system in the Country:

(Table: 1)
Benefits, Facilities by Government

Ministry of Social Justice & Environment	Responsible for welfare of senior citizen, NPOP, Schemes of assistance to Panchayati Raj, Voluntary Organizations & Old Age Homes, Financial aid to NGOs for care-giving services.
Ministry of Rural Development	Pension Schemes (65yrs) to destitute, Annapurna
Ministry of Finance	Tax rebates, higher interest rates, PPF etc., Special Counters
Ministry of Health & family Welfare	Hospitals, and special geriatric centers
Ministry of Railways	Special counters, discounted tickets
Ministry of Civil aviation	Discount in fares
Ministry of Road Transport & Highways	Seat Reservation in front rows
Miscellaneous	Telephone on priority, Priority & expeditious disposal of cases of elderly

Conclusion

Thus, programs for the elderly need both developmental as well as humanitarian interventions. Both governmental as well as the non-governmental voluntary sector need to work together to ensure a friendlier Society for the Elderly. This calls for a radical transformation from a Welfare State Model to Welfare Society Model, which needs active participation of all stakeholders, governmental as well as non-governmental. Political Will to ensure effective implementation of Welfare Schemes well supported by the Society can only ameliorate the plight of the Senior Citizens with the right feeling of them having a place in the people's heart.

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