



# Disease Management Association of India

(Organization with a Special Consultative Status with the United Nations – ECOSOC)

## Submission to Open-Ended Working Group on Ageing on “Autonomy and independence and Long-term and Palliative Care”

### India - An Ageing Country - facts & data \*

- India’s geriatric population is about 7.4 % (2011 Census) 98 million. So, according to UN definition India is an ageing nation.
- The population of senior citizen is likely to grow by 3.8 % every year compared to the population growth rate that is down to 1.8 % every year, and with this speed the senior citizens would be 143 million by 2021 and by 2026 it is likely to reach 173 million.
- The dependency ratio in India has increased from 7.8 in 1950 to 11.1 in 2010 (UN, 2013).
- The rising trend of nuclear families forces the elderly people to live alone.
- Migration also plays a major role in forcing the people to move to cities for better earning due to which senior citizens are left alone
- The triple hit – no income, no productivity and increasing healthcare spending will bring down the country’s growth rate and increase in spending on geriatric care.

*\*Reference: Healthcare Reforms in India – Making up for the lost decades by Rajendra Pratap Gupta, Elsevier 2016*

- India is categorized as a developing country; however, over the past 20 years, increases in the aging population and prevalence of advanced cancer are common.
- The need of palliative care in India is immense.
- With the current ageing scenario, there is a need for all aspects of care for the Oldest Old (80+ years) namely, socio economic, financial, health and shelter. Problems in the above-mentioned aspects have an impact on the quality of life in old age and healthcare when it is needed.
- Increase in life span also results in chronic functional disabilities creating a need for assistance required by the Oldest Old to manage simple chores. This policy looks at the increasing longevity of people and lack of care giving.



- In India, according to the last census in 2011, the 70 + population was 28,441,345 and the 80 + 11,289,005.
- The proportion of females is more in older age groups. There are 14,299,243 women compared to 14,142,102 men in the 70 + age group; in the 80 +age group, there are 56,888,57 women and 52,836,95 men.
- A majority of older women have limited or negligible social security benefits but greater morbidity and chronic health problems.
- The well-being of older persons is mandated in the Constitution of India under Article 41: "The state shall, within the limits of its economic capacity and development, make effective provision for securing the right to public assistance in cases of old age. The Right to Equality is guaranteed by the Constitution as a fundamental right. Social security is the concurrent responsibility of the central and state governments."
- National Policy on Older Persons also aims to create awareness regarding elderly persons to help them lead a productive and independent life.
- Older persons have equal rights to autonomy and independence in India, but due to their inability to live on their own & various other factors, sometimes their autonomy and independence is violated by their family members/caregivers and others.
- The right to autonomy and independence is recognized in India's constitution through the Fundamental Right to Life and Personal Liberty

## Implementation

- The Ministry of Health & Family Welfare, Government of India constituted an expert group on Palliative care. No separate budget is allocated for the implementation of National Palliative Care Program. But the Palliative Care is part of the 'Mission Flexipool' under National Health Mission (NHM).
- National Program for the Health-Care for the Elderly (NPHCE) The Government of India has started National Program for the Health-Care for the Elderly (NPHCE) for providing an easy access to promotional, preventive, curative and rehabilitative services through community based primary health-care (PHC). Identifying health problems among the elderly and providing appropriate health interventions in the community with a strong referral backup support. It would be building capacity of the medical and paramedical professionals as well as the care-takers within the family for providing health-care to the senior citizen.



## National legal framework

- The well-being of senior citizens is mandated in the Constitution of India under Article 41.
- The National Policy on Older Persons was announced by the Government of India in the year 1999
- “Maintenance and Welfare of Parents and Senior Citizens” Act 2007. This bill permits State Governments to establish old age homes with the minimum capacity of 150 elders for the neglected elderly people in every district. The State Government may establish a maintenance tribunal in every district under which every old age citizen can go and claim their right of maintenance seeking monthly allowance from their children or heirs. The appellate tribunal may also be established in every district. However, in India only 10% of retired employees get pensions from the government.
- The Government of India announced a National Policy on Older Persons in January, 1999. This policy provides a broad framework for inter- sectoral collaboration and cooperation. The policy has identified a number of areas of intervention -- financial security, healthcare and nutrition, shelter, education, welfare, protection of life and property etc. for the wellbeing of older persons in the country. While recognizing the need for promoting productive ageing, the policy also emphasizes the importance of family in providing vital non-formal social security for older persons.
- National Policy on Senior Citizens, 2011- The policy will strive to create a tiered national level geriatric healthcare with focus on outpatient day care, palliative care, rehabilitation care and respite care.
- Hospices and palliative care of the terminally ill would be provided in all district hospitals and the Indian protocol on palliative care will be disseminated to all doctors and medical professionals.
- The National Health Policy 2017 seems promising in this context with its specific mention of improving health status through concerted policy action in all sectors and expanding preventive, curative, palliative and rehabilitative services provided through the public health sector with the focus on quality.
- It is imperative that Long Term Palliative Care is made an important component of primary health care and be the responsibility of frontline health workers in rural and urban areas.
- The government’s National Programme for the Health-Care for the Elderly is a step in the right direction but much more remains to be done so that old age becomes a productive and fulfilling time for people.



## **Social Security**

- Indira Gandhi National Old Age Pension Scheme (IGNOAPS) Under this scheme, all Below Poverty Line Indians above 60 years are covered.
- In September 2018, India has launched health insurance programme- Ayushman Bharat (PMJAY) which offers Rs.500,000 coverage per household to 10 crore poor families
- According to the National Health Policy 2017, primary healthcare system is strengthened by larger budgetary support to provide geriatric care

## **Equality and non-discrimination**

- The presence of political workers, social activists, village panchayat administration, ASHA workers, strong community networks, family ties, help elderly in rural areas get access to social security schemes

## **Accountability**

- Under Section 20(1) of the Hindu Adoption and Maintenance Act, every Hindu son or daughter is under obligation to maintain aged and infirm parents if they are unable to maintain themselves with the amount determined by a court.
- In 2007, the Maintenance and Welfare of Parents and Senior Citizens Act was passed to provide maintenance support and protection of life and property of older persons. The Act establishes the Maintenance Tribunal to provide speedy and effective relief to elderly persons. The Protection of Women from Domestic Violence Act creates post of Protection Officers to address complaints of women suffering from domestic abuse.

***Disease Management Association of India is working with all stake-holders to push for a stronger social security for senior citizens through education, health and re-skilling programs.***

We hereby submit the above-mentioned inputs on behalf of the Disease Management Association India.



Also, we look forward to the engagement with the United Nations on furthering the objectives of the UN group on Ageing and working with you closely.

We remain at your disposal for any further information or clarification on the above submission

For & behalf of  
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