**IX SESSION OF OPEN-ENDED WORKING GROUP ON AGEING**

1. **Long Term and Palliative Care**

The phenomenon of population ageing is becoming a major concern for the policy makers all over the world, both for developed and developing countries. In India, according to the population census 2011, there are 104 million elderly persons. The proportion of elderly population in India has increased from 5.6% in 1961 to 8.6% in 2011, and estimated to be 19-20% by the year 2050.

The need to formulate policies and programmes for elderly persons has been acknowledged by the Indian government and therefore it has taken number of initiatives to promote the welfare of elderly persons. The Government of India had formulated and adopted the ***National Policy on Older Persons (NPOP) in 1999 which was later revised to National Policy on Senior Citizen in 2011.*** The said policy had recommended for strengthening and orienting the primary health care system to enable to meet the health care needs of elderly persons while stressing upon the need for preventive, curative, restorative and rehabilitative services. Thereafter, ***the Maintenance and Welfare of Parents and Senior Citizens Act in 2007*** defined the responsibilities of the family and the State in providing care for elderly persons. Under Section 20 of the said Act, the state government is to ensure that facilities for treatment of chronic, terminal and degenerative diseases are extended to elderly persons.

While the above said policy and the law provided the framework, the most visible intervention in old age care was the launching of the ***National Programme for Health Care of the Elderly (NPHCE) in 2011***. The NPHCE was a fulfillment of the international and national commitments of the Government of India as envisaged under the United Nations Convention on the Rights of Persons with Disabilities, NPOP (adopted in 1999) and Section 20 of the Maintenance and Welfare of Parents and Senior Citizens Act, 2007, dealing with facilities for treatment of chronic, terminal and degenerative diseases being extended to the elderly persons. The programme provides for easy access to the health services through community based primary health care; to identify health problems and manage them; building of the capacity of medical and paramedical professionals as well as of the caretakers within the family among others.

Recently, ***the Integrated Programme for Older Persons, an initiative launched by the Government of India in 2015*** **(revised in 2016)** provides for financial support to maintain homes for older persons, respite care homes and continuous care homes; run multi-service centres for older persons to provide day care, educational and entertainment opportunities, health care and companionship; to maintain mobile medical units for older persons living in rural or isolated areas; to provide specialized care by running day care centres for Alzheimer’s disease and related disorders, multi-facility care centres for elderly widows, physiotherapy clinics and help lines and counselling centres for elderly persons. Overall, the policies and programmes in India have targeted the needs of elderly persons for care and support.

While the health services are available in public settings under different policies the Government, the care of elderly persons remains a responsibility of the family. A study from Indian Council for Medical Research (ICMR) (2012) at the All India Institute of Medical Sciences revealed that 70 per cent of patients who received emergency care died in their home indicating the importance of developing home care services for older persons. Keeping this in view, the problems of the elderly persons may increase with the increasing proportion of nuclear families, especially in urban areas, as nuclear families are less able to provide long-term care. Adding to this, the elderly persons suffer from problems such as disability, restricted mobility, loneliness, poverty and lack of awareness on accessing old age care.

The elderly population in India is plagued with deteriorating health and, thus, there exists a need for greater coverage of medical insurance. Though, the health insurance policy is evolving in India till recently, as the government has launched ***Ayushman Bharat,*** the biggest health insurance scheme in 2018. To ensure that nobody is left out especially women, children and the elderly, there is no cap on the family size and age for availing the insurance.

Despite the various robust initiatives undertaken by the Indian government, much remains to be done in order to ensure the expansion of the coverage as well as the implementation of existing legal and policy provisions for the long-term care of the elderly persons.

**II. Autonomy and Independence**

The Constitution of India envisages protection of the rights of all citizens of India, including senior citizens. Article 41 of the Constitution of India mandated the state to make effective provision for securing the right to public assistance in cases of old age. Besides, Article 46 of the Constitution directs the state to protect the economic interests of the weaker sections.

The Government of India has made concerted efforts to provide older people their right and a significant legislative provision exists in the country, i.e. ***Maintenance and Welfare of Parents and Senior Citizens Act, 2007***. The legal right to claim maintenance is provided under Maintenance and Welfare of Parents and Senior Citizens Act, 2007. The Act puts obligation on the children to maintain a senior citizen in their family to lead a normal life. The maintenance includes provision for food, clothing, residence, medical attendance and treatment. In case they fail to do so, the Senior Citizen may file a petition before a Maintenance Tribunal for payment of maintenance allowance from children. It also envisages establishment of Old Age home in all district of the country. In order to ensure autonomy of the elderly persons, awareness is the first step for concerted effort for advocacy. The Maintenance and Welfare of Parents and Senior Citizens Act laid stress on improving awareness among elderly about their rights and various services available to them.

The ***National Policy on Older Persons (NPOP), 1999*** (revised in 2011 to National Policy on Senior Citizen), reaffirmed the constitutional commitment to ensure the well-being of elderly, accelerate welfare measures and empower the elderly in ways beneficial for them. In line with the policy, elderly persons also get significant tax concessions under Income Tax Act 1961, and also get travel concessions from the Railway Ministry and Civil Aviation Ministry to reduce their financial burden.

Further, the ***Rights of Persons with Disabilities Act, 2016*** ensures laying down of standards of accessibility and also to develop schemes to promote barrier-free access to public spaces.

 The National Human Rights Commission of India has constituted a Core Group on Elderly and Disability to review the existing government policies, laws/rules/orders from human rights perspective, to identify voids and gaps in the policy framework for implementation and to suggest measures to fill the same and to examine the best practices in India and abroad dealing with the care of elderly. The Core Group has taken note of the fact that many of the eldely persons are now living alone in their home without any support from the family. These elderly persons require the services of a caregiver for their daily activities like visiting to health care facilities, bank, market, etc. It requires services of a skilled and sensitive people. The Core Group has recommended to the Government to develop a scheme of ‘Time Bank’ for taking care of the older persons wherein the volunteer saves time of taking care of elderly who need help. Their service hours will gets deposited into their personel account of social security system. When the volunter get old and needs someone to take care of him, he/she would use the Time Bank and a voluteer will be assigned to take care of him/her.

 It has also recommended to the government to encourage elderly persons to organize themselves into Self Help Groups to improve interaction and to socialize among themselves. Besides, services of these groups may also be utilized in holding regular legal awareness classes. They could also voluntarily come together to save regular small sums of money, mutually agree to a common fund and to meet their emergency needs on the basis of mutual help. It would help in promoting independence among the elderly. It also recommended to the government that the old age pension should be such which allows older persons to live their life with dignity. These steps, if implemented, would ensure autonomy and independence of older persons to live their life with dignity.