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## **MEET THE ADVISORS**

Azaad आवाज़ aims to tackle an erosion of empathy in our society. This monthly magazine (Patrika) aims to focus on the marginalized sections whose voices are often muted in the cacophony of flashy mainstream media discourse. When referring to the marginalization, this platform does not aim to restrict itself to the traditional focus on social aggregates like caste and race alone but aspires to include a discussion on class, gender, sexual orientation etc. Azaad आवाज़ sculpted as a digital media station focuses on issues that debilitate the “deliberately silenced”, drawing no boundaries and aspires to evolve and voice the needs of those silenced.

## AN INITIATIVE UNDER



## SENIOR CITIZENS: FINANCIAL INCLUSION AND ECONOMIC SECURITY

The elderly in India face different forms of abuse and have different insecurities. One such insecurity is financial insecurity.

The Longitudinal Aging Study in India (LASI) (2017-18) notes that due to changing circumstances, especially the kith and kin of senior citizens moving away from them for education and job opportunities and the shift in family structure, from a joint family to a nuclear family, is leading to major economic impact amongst the senior citizens.

The economic situation of elders in India is abysmal. The LASI study found that out of all senior citizens surveyed, only 35.7% were currently working, while 37.9% worked in the past, but were not working after the age of 60. 26.4% had never worked.

The statistics also show the gendered differences - while 50.9% of the men above 60 years of age were still working, this number was only 22% when it came to females.

Most of the senior citizens who were still working were living in rural areas and belonged to the unorganized sector. They were mostly employed in agriculture - either in farms/fisheries/forestry or as agricultural labourers. Moreover, the mean monthly income for people working after the age of 60 in agriculture is a meager Rs. 4856.

Our system of providing pensions also needs a major overhaul. 78% of the population of elders above 60 years of age do not get and do not expect to get, a pension in India.

Only 19% of the population gets a pension, and only 3% expect to receive one in the near future. This pattern is also seen in the organized sector - while 7% of the population has retired from working in the organized sector, only 6% of that actually gets a pension.

A study by the World Health Organization and HelpAge India explains the implications and dynamics of economic and financial insecurity amongst the elderly. Economic problems were a key issue amongst the middle-class men, but there was a general consensus that economic hardships were prevalent amongst women belonging to the low-income group, especially if they were widows.

This economic and financial insecurity has led them to be completely dependent financially on their sons and daughters, and this dependence has been linked to the ill-treatment, humiliation, and complete neglect by their children, and other family members. These episodes have led to them having additional physical and mental health issues.

This ill-treatment of senior citizens by their children also manifests as different forms of abuse, especially financial abuse and economic exploitation. This is an issue that is scantily addressed.

While there are different forms of abuse within the ambit of economic abuse, such as misappropriating funds, forging signatures, and committing fraud for financial gains, the most prevalent forms of financial abuse to which the elderly community is subjected are, the unauthorized disposition of their property and their isolation to confined living spaces within the house.

One way financial insecurity can be addressed is through re-employment, but this has been a problem in India since the number of job opportunities diminishes as the age of a person increases. Therefore, states should be actively encouraged to re-employ senior citizens, especially to give them a sense of financial security.

Different countries, including India, are also cognizant of the fact that due to an increase in the life expectancy of humans, and the decreasing trend of fertility rates, there would not be enough people belonging to the working population who could replace the senior citizens. Till this happens, governments should be providing pensions, which, as seen above, has not been effective.

Thus, from the perspective of policy-making, re-employment and re-skilling of senior citizens is a major requirement. One way through which the governments addressed this concern is by increasing the retirement age - states like West Bengal and Kerala increased the age of retirement of doctors, especially after they were met with a lack of doctors.

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***This economic and financial insecurity has led them to be completely dependent financially on their sons and daughters, and this dependence has been linked to ill-treatment, humiliation, and neglect.***

Tamil Nadu re-employed some of its senior civil service cadres as Officers On Special Duty and consultants to projects the state signed with the Asian Development Bank.

But these measures are not enough, especially since most of the senior citizens work in the informal sector, and most of the technologies and innovations they worked with have changed. Thus, it is important for governments to be cognizant of these demographic changes, and be cognizant of the economic issues and their subsequent physical and mental health issues.

The Central Government had announced a slew of policy measures to address the same - especially in its Draft National Policy For Senior Citizens (2020). According to Rajit Mehta, the draft policy has identified some loopholes in the pension scheme of India and has proposed a series of interventions.

This includes integrated and comprehensive insurance coverage and saving schemes, a senior-citizen-friendly tax structure, and support to find alternative career options in teaching and consultant services, both in the private and public sectors. But the success lies in its implementation. It is to be noted that a draft policy with similar promises was already introduced in 2011, but the state of senior citizens has not witnessed significant improvement.

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***One way through which financial insecurity can be curbed is through re-employment, but this has been a problem in India, since the number of job opportunities diminish as the age of a person increases.***

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# Medical Indebtedness and Financing Healthcare

IN CONVERSATION WITH DR, INDRANIL MUKHOPADHYAY

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***For 20.1% of the Indian Population, borrowing is the first source of healthcare financing and for 35%, it is the second source of healthcare financing implying that debt is a corollary to meeting healthcare needs.***



**Dr. Indranil Mukhopadhyay**

Associate Professor  
Jindal School of Government and  
Public Policy

There is often a positive relationship between aging, deterioration of health, and consequently the frequency of healthcare requirements. According to the National Health Profile 2018, India is among the countries with the least public health spending accounting for about 1.6% of the GDP forcing most people to turn to the private health sector for better quality albeit highly-priced healthcare.

According to the World Health Organisation's health financing profile for 2017, 67.78% of the total expenditure on health in India was paid out of pocket while the world average is just 18.2%.

For 20.1% of the Indian Population, borrowing is the first source of healthcare financing and for 35%, it is the second source of healthcare financing implying that debt is a corollary to meeting healthcare needs.

This predicament, while extensive specifically affects senior citizens. According to the Agewell Foundation's Report titled 'Financial Status of Older People in India', 19.35% of the older persons claimed that their financial status is very critical. Pensions have been the main source of income for 41.43% of the elderly population.



Around 61% of the respondents said that they are not satisfied with old-age financial security schemes in India. The lack of steady income-generating activity, the inadequacy of social security schemes, increased vulnerability to diseases, and the need for chronic care afflicts the elderly community with financial and consequently health insecurity.

Most members of the elderly community rely on their static retirement corpus to fund their healthcare needs, when their savings run out or are unable to cover costs, they resort to borrowing.

The problem of medical indebtedness arises due to the excessive reliance on Out Of Pocket Expenditure (OOPE) to meet healthcare needs; insurance could therefore help reduce OOPE, thereby mitigating the problem of medical indebtedness. The question that then arises is whether the private and public tax-driven insurance systems are effective in financing the healthcare needs of the elderly community.

In pursuance of this question, this edition of Vichaar had the honour of hosting Professor (Dr.) Indranil Mukhopadhyay, Associate Professor at Jindal School of Government and Public Policy. Dr. Mukhopadhyay begins providing insight into the gravity of the problem of medical indebtedness and draws attention to the inequalities in access, seeking, and reporting of healthcare requirements and, borrowing power, that exists depending on factors such as age, economic background, caste, and gender.

He points out that health-seeking behaviour is the least among marginalised societies and it is lower in rural areas when compared to urban areas.

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***Most members of the elderly community rely on their static retirement corpus to fund their healthcare needs, when their savings run out or are unable to cover costs, they resort to borrowing.***

Due to the high cost of healthcare and the apprehension of indebtedness people also do not seek help unless the health condition has deteriorated to a point where they have no other choice than to seek professional medical help.

He then compares the private and public sectors of healthcare on the basis of motive, quality of care, infrastructure, and cost of care. He contradicts the notion that the private sector provides better quality care and asserts that while the private sector provides better service quality, it is the public sector that provides healthcare higher in clinical quality. He adds that quality of care is not static; there is a positive relationship between clinical quality and service quality.

Next, he begins evaluating the private and public-tax-driven health insurance systems in India. He states that contrary to common conceptions, the private health insurance market is very weak, benefiting only the top 20% of the population, and the public tax-funded insurance schemes have failed to cover the needy sections of society.



He asserts that it is the lower middle class of people that are most vulnerable as private health insurance is inaccessible to them and they are not eligible for public tax-funded health insurance. Elderly people also, he maintains, would not be adequately covered by insurance due to the barriers in accessibility to private insurance.

He explains that the Ayushman Bharat Scheme, though exceptional as a concept, has made very little progress with regard to the allocation of funds or the implementation of its programs.

Finally, he speaks about the changes that need to be made in order to ensure universal healthcare and coverage. He emphasizes the importance of expanding public investment and opines that at least 3.5% of the GDP must be allocated for healthcare in the long term.

He opines that the private sector of healthcare must be systematically and comprehensively regulated to curb problems such as exploitation, over-charging, and induced demand for unnecessary care in order to push it into a form of solidarity with public health goals and de-commercialize and de-commodify healthcare.

He asserts that people must be aware of their right to healthcare, the insurance that they are due and make it a point to demand what they are due. He concludes by opining that healthcare is about 'care' and therefore empathy and solidarity are essential in care provisions. Healthcare systems he asserts must be geared towards care.

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***The private sector of healthcare must be systematically and comprehensively regulated to curb problems such as exploitation, over-charging, and induced demand for unnecessary care in order to de-commercialize and de-commodify healthcare.***

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This podcast provides insight into the issues that plague the healthcare and insurance systems in India. This podcast is a must listen!

# Financial Insecurity and Re-employment of Retirees

IN CONVERSATION WITH MR. HIMANSHU RATH

*Q. According to the Agewell Foundation's Report titled 'Financial Status of Older People in India', 49.32% of the rural elderly population and 35.49% of the urban elderly population are dissatisfied with their current financial condition. 19.35% of the older persons claimed that their financial status is very critical. Pensions have been the main source of income of 41.43% of the elderly population. While 58.7% of the respondents disagreed with the fact that old-age pension schemes are working well in India, over 36.9% of respondents said that, in their opinion, disability benefit schemes, particularly for the elderly, are not satisfactory in India. Around 61% of the respondents said that they are not satisfied with old-age financial security schemes in India.*



**Mr. Himanshu Rath**  
*Founder and Chairman,  
 Agewell Foundation*

*In light of this, what are the effects of financial insecurity on the elderly population's ability to access essential services like healthcare, nourishment, or housing, and how do experiences of financial insecurity and accessibility to resources change in relation to an elderly person's caste, gender, sector of work or residence (urban or rural)?*

In India large population is working in an unorganized sector and the proportion of such a workforce is increasing rapidly due to various reasons like outsourcing of various services by the government sector and organized sector.

People working in the unorganized sector are prone to financial insecurity in old age when they are not able to work and earn. In old age due to various other factors like mobility problems, financial and health-related issues, people have limited access to resources.

Social security has always been a primary focus area of various plans and policies of the Government of India since independence. Initially, almost all social security schemes and programs were focused on younger generations, and issues related to healthcare and disability were addressed by these schemes.

Old Age social security was considered as a family subject, as most people lived with their children in old age. With the rapid increase in the population of older persons and fast-changing socio-economic scenarios, issues concerning old people are now also being included in the social security schemes over the years.

Realizing the ever-increasing population of older persons and fast-changing socio-economic & demographic scenario, the Government of India has also prioritized old age-related issues in its social security and social protection schemes and programs. India's social security system comprises a number of schemes and programs.

Still, the government-controlled social security structure in India applies to only a small portion of the population. In India, the caste system is deep-rooted, hence its impact on the various communities is widespread.

Though traditionally older people are respected and taken care of by younger family members across the castes/communities in India, it is observed that elderly with financial security i.e. who are getting retirement pensions/family pensions or getting income from other sources like savings/investments/rental from properties/income from business are comparatively well cared for.

People without financial security in old age are prone to neglect/harassment/elder abuse. In rural areas, the status of older persons is more critical, because most of them are dependent on their family members for their needs and requirements due to no/less income in old age.

It has been observed that older women are more prone to neglect/harassment/elder abuse in old age due to comparatively less knowledge, lack of education, and awareness about their rights.

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***In rural areas, status of older persons is more critical, because most of them are dependent on their family members for their needs and requirements due to no/less income in old age.***

Q. In an interview with Livemint, in 2019, you said, “Government policies and our social norms are not at par so far as social security in old age is concerned. The condition of social security schemes is very depressing”. What are the drawbacks of the social security schemes available to the elderly population in India? How has the Code on Social Security 2020, if it has helped in mitigating the limitations to the provision and access to old-age benefits in India?

Providing social security to a large population of India is a major cause of concern for the Government in India. With ever-growing numbers of older persons and the fast increasing life span of people, ensuring the social security of older people is one of the major challenges.

There are major drawbacks to existing social security schemes. One such drawback is that coverage of such schemes is very less – primarily people working in the organized sector get the benefits of social security schemes.

## AWAAZ IN FOCUS

The amount of old-age pensions, widow pensions, or disability pensions is very less, which is not enough to meet the basic needs of the beneficiary. There is also irregular and delayed delivery of benefits. In some cases, there has been a delay of 6 to 12 months.

These schemes are poorly implemented and there is a lack of transparency and accountability. I believe that every single financial security scheme should be transparent, and accountability must be fixed with concerned officials/stakeholders.

Apart from the non-availability of social security funds with concerned departments, there is a lack of awareness about the financial security and social security schemes and provisions among the public, particularly among older persons living in rural areas. In some cases, even people working with program implementation agencies are not aware of these schemes.

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The amount provided as Old-Age Pension should be benchmarked to the increasing cost of living, and provisions for tax incentives should be made available for employees who are looking after dependent senior citizens.**

To ensure social security for people in old age, concerned stakeholders need to focus on maximum coverage under existing and/or new social security schemes. Medical, as well as life insurance till the end of life, should be provided along with financial security in old age. There should also be widespread coverage of properties, movable/immovable, under general insurance schemes on concessional rates for older persons.

A positive environment for financial planning from a younger age should be implemented so that they can earn ensured income in old age.

Spreading of awareness regarding medicines and healthcare equipment beneficial to them in old age, particularly in rural and semi-urban areas is required. There should also be dedicated healthcare facilities, particularly in rural and semi-urban areas. Old age pension amount should be benchmarked to the increasing cost of living and provisions for tax incentives should be made available for employees who are looking after dependent senior citizens.

*Q. According to you, should old-age benefits, such as pension schemes be universal or targeted? What are the challenges to the effective universalization of old-age benefits in India?*

Yes, old-age benefits, such as pension schemes should be universal. All eligible elderly must be covered under the system automatically. Preference must be given to older women, who are more prone to financial insecurity in old age. The large elderly population is a major challenge to effective universalization. In addition, increased life span in old age is another major challenge before the government.

India has a broad ambit of social protection programs, but the overall public expenditure on social protection (excluding public healthcare) is only approx. 1.5% of the GDP, lower than many middle-income countries across the world. In India, most social protection programs are aimed at addressing capability deprivation (inadequate nutrition, lack of employment, low educational attainment), rather than providing safety nets to deal with contingency risks (health shocks, death, disability).

Contingent social security covers mostly organized sector workers, who comprise only 8% of India's workforce. In the past decade, a social security scheme (Rashtriya Swasthya Bima Yojana) has been introduced for unorganized sector workers, but less than 20% of the population is covered under any form of insurance.

Out-of-pocket health expenses, which create barriers to seeking healthcare and can push marginal households into poverty, form as much as 89% of private expenditure on health. Against this background, India has only recently started a long-overdue move towards universal social security.

In 2015, the Government of India introduced a life insurance scheme (PM Jeevan Jyoti Yojana), an accident insurance scheme (PM Suraksha Bima Yojana), and a contributory pension scheme for unorganized sector workers (Atal Pension Yojana).

The lack or the absence of interest of local authorities and representatives in old age income security schemes is also one of the major causes of concern. Universalization of old-age benefits schemes will help in ensuring independent life in old age. Older persons who have to depend on their family members/relatives/others for financial needs should have minimum social security assurance in old age.

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***Universalization of old-age benefits schemes will help in ensuring independent life in old age.***

*Q. Agewell Foundation's Employment Exchange Programme aims at providing gainful employment to elderly communities. What was the rationale behind the introduction of the Programme? What are some of the job prospects available to the elderly population in India today? How can workspaces adapt to the changing demographic and create age-friendly workspaces?*

In our country, the population of older persons has already crossed the 130-million mark and their number is growing rapidly. Over the years, the socio-economic, demographic, medical, and traditional scenario has changed remarkably, but our perceptions about older persons have not changed accordingly.



Generally, after 60, people are treated as old and retired. With a longer life span, older people are now capable of continuing to work in their 60's, 70's and even in their 80's. The marked increase in life has also increased the financial and other requirements of older persons.

Whereas the government is still unprepared to meet the challenges of financial security of old people due to longer old age and traditional family care of older persons becoming dysfunctional.

Today, rigid notes of aging are no more applicable and the government and society have to be in tune with the realities of changing times. Undoubtedly, older persons are a huge source of wisdom, knowledge, experience, and values, which can be utilized in the interest of society and the nation.

In view of increasing life expectancy, it is pertinent to ensure empowerment in old age; economically, socially, and medically, especially to those who belong to the economically weaker section.

Re-employment of old retired people primarily belonging to economically weaker sections is like tapping non-conventional energy resources useful in all ways and beneficial for all. It is like ensuring an active, meaningful, comfortable, and above all respectful life in old age. In today's IT-dominated world, for providing gainful engagement opportunities to older people there is an urgent need to reskill them by providing them soft skill training or some kind of new skill development training as per the market requirements.

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***Re-employment of old retired people primarily belonging to economically weaker sections is like tapping non-conventional energy resource useful in all ways and beneficial for all.***

Indeed it is ironic; very few people prepare themselves for their life after retirement. Research suggests that normally most of the people at the time of retirement have one or more of the following unfinished tasks in hand; Children are still attending school or college, medical treatment of family members, marriages of their children, some have their parents living with them, etc. In addition, most of them are mentally and physically fit to work for another 10-15 years.

The elderly people find it difficult to find a suitable job/employment due to various reasons such as they are not well versed with information technology, lack of modern communication skills, they are not aware of where and whom to contact. There are no separate placement agencies or organizations to help find new jobs and they also find it odd to approach placement agencies and compete with younger people.



Placement agencies are also usually more focused on younger applicants. On the other hand, there are a number of organizations in the private sector that are in constant need of experienced, mature, and knowledgeable employees. They find it difficult to locate them.

There is no placement service, which can meet their requirements. These experienced people can be a great asset to any organization provided they are utilized properly.

Under the Employment Exchange, Agewell proposed to set up a Re-tooling/Re-skilling Cell for older persons. It aims to provide re-tooling and soft skills training to retired old people. It also aims to help them upgrade their existing skills, encourage older persons for self-employment, provide tips and guide them on re-employment, thus making them self-reliant in old age.

There are placement cells that are exclusively established for Retired Older Persons and their aim is to provide a common platform for job seekers in old age and job providers for older persons. They explore gainful re-employment opportunities for older persons and develop linkages among concerned stakeholders.

They also provide them with relevant information about suitable gainful engagement opportunities available in their area and assist the corporate sector and small business establishments in hiring services of older persons.

Some of the job prospects for retired people can be, administrative or supervisory work, they can be a Consultant or an advisor to organizations. They can also help in the marketing of products and services, handle accounts, etc. Elderly people who are retired educators can also take up tuition or extra classes for students.

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***These experienced people can be a great asset to any organization provided they are utilized properly.***



Mr. Himanshu Rath is the founder and Chairman of Agewell Foundation. Agewell Foundation, India is a not-for-profit NGO that has been working for the welfare and empowerment of older persons of India since 1999. It is associated with the Department of Public Information, United Nations (UN-DPI-NGO). Agewell has also been a member of various Working Groups and Steering Committees on Social Sector for three consecutive Five-Year-Plans of Planning Commission of India since 2002.

# Social Security : Perspectives and Policy

By Divyanshu Dembi

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***A combination of low fertility rates and a longer life expectancy will result in populations that are older and increasingly reliant on governmental social safety nets than at any previous time.***

The concept of social security is not new in India. Traditionally, a moral economy existed to provide security to the older destitute and other vulnerable groups in society. This worked within joint family systems in which the younger generation was taught to care and look after the older generation.

A sense of respect and duty of caring was associated with being a member of the family. This system has provided income, health care, and personal, physical, and emotional security for all family members, including the elderly.

However, gradually, due to a host of factors such as work-related migration, withering of traditional familial structures among others - traditional support systems are disappearing, and state-based social security systems have come into existence.

In 2005, India reached the threshold according to which the UN defines a country as “aging”, i.e. at least seven percent of the population is 60 and older. As part of a bigger landscape, in 2010, Asia accounted for 54.4% of the global total of those above 60 years of age, and this is projected to increase to 59.9% by 2030.

A combination of low fertility rates and a longer life expectancy will result in populations that are older and increasingly reliant on governmental social safety nets than at any previous time. Thus an aging population needs to be looked at as part of a complex economic and fiscal problem having a bearing on the economic output of the nation, and the world as a whole.

Any analysis of pension schemes should have a focus on the effects of the pension system on growth, labor markets, and equity, and should consider the pension system as a whole and not each component separately.

The main objectives of any social security (or social protection) system are consumption smoothing over an individual's lifetime; insurance (particularly against longevity and inflation risks); income redistribution for society as a whole; and poverty relief. There has been a tendency of looking at pension policies in isolation and enforced without much evidence. There is a strong case for viewing social security systems as an integral part of the overall economic, social, human resources, and political management in India.

This will require a change in the mindset - from welfare orientation to professional-technocratic service orientation. The need for effective management and application of the principles of pension economics and finance in social security policymaking and administration must receive much greater recognition than is the case currently.

There is also a sound argument of integrating healthcare and social security for elder persons as a unified policy response. Many studies have shown that a better standard of living has a positive correlation with the quality of healthcare received by elder persons. Thus it is also useful to regard healthcare and pensions as a bundle of goods and services that the elderly will need to consume.

This bundle of services represents a significant share of national income (up to 20% in OECD countries). How this bundle of services is financed and organized could not only impact the adequacy of current healthcare and pension arrangements but on other important areas as well. Better management of healthcare expenditure through “healthy aging”, also increases the real value of pension income.

What this essentially means is that having better healthcare policies in place, that in turn not only result in longevity of life but also increase the quality of such life and may also increase the purchasing power of such elder persons during the retirement period. From a macroeconomic perspective, more effective use of primary care and secondary care through “gate-keepers” also reduces healthcare expenditure.

As these are complex intertwined fiscal policies, a high economic growth is imperative to increase the state capacity to be able to spend such amounts of money. Therefore economic growth can also be argued to be a moral imperative.

### ***The Indian Perspective***

The majority (about 80%) of India’s elders still reside in rural areas; 40% live below the poverty line, with nearly 33% just above it. The most vulnerable are those who do not own productive assets, have little or no savings or income from investments made earlier, have no pension or retirement benefits, and are not taken care of by their children; or they live in families that have low and uncertain incomes and a large number of dependents.

Nearly half of the elderly are fully dependent on others, while another 20% are partially so. Particularly in rural areas the tendency is to spend more on their growing children, while minimizing expenditures on aged parents; thus, financial security for the elderly in rural families is very limited.

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***It is also useful to regard healthcare and pensions as a bundle of goods and services that the elderly will need to consume.***

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Retirement for older Indians, however, has not been and is not the norm today. Those working in the “organized sector” (primarily government employees), who constitute 10% of the working population, are subject to mandatory retirement.

Almost 90% of workers are found in the agricultural sector where there is no retirement age. Rural elderly continue to work but they reduce the number of hours worked, especially with increasing age. Workers in this sector are subject to numerous disadvantages. Wages are relatively low and there is no job security. Most do not have year-round work and labour turnover is high.

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***Article 41 of the Indian Constitution directs the Indian state to deliver “public assistance in cases of unemployment, old age, sickness and disablement, and in other cases of undeserved want”.***

Article 41 of the Indian constitution directs the Indian state to deliver “public assistance in cases of unemployment, old age, sickness and disablement, and in other cases of undeserved want”. This has been the impetus behind many of the state sponsored national pension assistance programs.

The state’s pension policy for government employees hasn’t been the focus of much scholarship and debate due to the fact that such persons are not in dire need of such state assistance. There has been a much greater focus on analyzing how the social security programs for the marginalized and down trodden work. There are two questions to be asked here. Firstly do the benefits of such schemes really reach the intended beneficiary, and secondly, what is the marginal improvement that such policies have on older persons.

Pradhan Mantri Shram Yogi Maan-dhan Yojna is the state social security policy for workers in the unorganized sector. It is aimed at persons mostly engaged as rickshaw pullers, street vendors, mid-day meal workers, head loaders, brick kiln workers, cobblers, rag pickers, domestic workers etc. It is a contributory and voluntary pension scheme for individuals from 18-40 (entry age) who earn less than 15,000 per month. Such persons receive 3000 per month after the age of 60.

However the much more important social security scheme can be argued to be the Indira Gandhi National Old Age Pension Scheme (IGNOAPS). This scheme does not involve any contribution and is a pure unconditional state assistance for those who fulfil the eligibility. The person should be over 60 years and should be living under the poverty line.

Even though there have been extensive debates about the way that the poverty line is calculated, many studies have shown that the scheme is highly successful and pensions reach the intended beneficiaries without major leakages or evidence of massive fraud.

The state also runs the Annapurna program which gives people 10kgs of ration per month for sustenance. However it is eligible only for people who are eligible under IGNOAPS but for some reason were not able to avail of the scheme. There is an additional qualification of 'destitution' under the program which varies from state to state and there exists no standard.

### ***Public Evaluation of Entitlement Programs***

An extensive study conducted by IIT Delhi found some very important outcomes. More importantly it was able to uncover the real life impact of the social security schemes. A common objection to social security pensions is that they might displace or undermine family support for widows and the elderly. The survey suggests that, if anything, it is the other way round: a pension often helps them to earn some respect.

The study found that most beneficiaries of the IGNOAPS are economically inactive and live in households where familial support is limited: almost half live alone, or just with a spouse, or with unmarried children.

Most of them (82%) are illiterate, and about half were unable to engage in any productive work other than helping out with household chores. This makes them dependent on others for things as basic as food, clothing and shelter.



***A common objection to social security pensions is that they may displace or undermine family support for widows and the elderly***

Even where family support was available, it was inevitably meagre. Only 13% of the respondents' families live in a pucca house, 18% have access to piped water, and 13% have a latrine at home. The study recorded the experiences of many beneficiaries of this scheme. Narrating the account of some such beneficiary, it notes:

*"Among many beneficiaries was Vifai. Vifai is an 80-year-old dalit widow from Getara village of Surguja district, Chhattisgarh. She receives a monthly pension of Rs 300 under the Indira Gandhi National Old Age Pension Scheme (IGNOAPS). She lives alone as her sons have abandoned her. She is very frail, and unable to work. To collect her pension, she has to walk all the way to the bank, 12 km from her house. As she describes it, "Rengat rangat jaati hun, ab kya karun" (I crawl to the bank, what to do?)."*

*"JasoMahto is a 56-year-old illiterate widow who lives in Tulasikani village, Sundargarh district, Odisha. She gets Rs 300 a month under the IGNOAPS. She believes that her relatives would treat her worse than they do were she not getting a pension."*



*"Tija Bai, a 65-year-old dalit widow from Rajpura village in Sirohi district (Rajasthan), said that her daughter-in-law ill-treats her. She is made to work a lot before she is fed. Tija Bai believes that the situation would be much worse if she were not getting a pension: "Agar pension nahi milti to roti aisi di jati hai jaise kutton ko roti fenk dete hain" (If I were not getting a pension, they would have fed me like a dog)."*

### ***Other Considerations***

Thus the evidence singularly pointed to the fact that a pension gives the recipient some sense of independence and security. Some pensioners are able to contribute to the household budget, especially in states where the pension amount is significant and make their role dignified within the family.

However the cost of collecting pension in itself is a major burden. Many other studies have shown that many people who either live far from pension collection centres, or suffer from any infirmity have to hire some form of transportation to ferry them to-and- fro which in turn reduces the final pension amount.

Aadhar has been ruled as not mandatory for pension policies by the Apex court. Even though there is considerable evidence that even Aadhar does not seal leakages, in absence of Aadhar there are four main sources of leakages in such schemes.

First, enrolled pensioners might not be receiving their pension in full, or even in part. Second, duplicate records in the administrative database may lead to somebody else cashing in. Third, "ghost" beneficiaries may exist—these are pensioners who have died or do not exist, allowing fraud recipients to receive pensions.

Fourth, pensioners may have to pay bribes at the time of joining or during the year to receive pensions.

The roadblocks to better implementation have always existed that stop the social security policies from being a success. Various institutional and procedural complications such as the identification of appropriate lead departments, the development of district-wise distribution of targets, the creation of state and district-level committees, and opening separate program accounts are some of the administrative problems that have arisen since the inception of the program.

Procedural issues included identification of true beneficiaries; often a procedure lacking accuracy, and ways to disburse payments. It was intended that this Central Government assistance would not displace the states' own efforts and expenditures for their old-age pensions and that states could expand their own social assistance programs independently.

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***The evidence singularly pointed to the fact that a pension gives the recipient some sense of independence and security.***



However, most of the states are disbursing only the national assistance funds and have diverted their own resources to other programs.

Finally there have been many recommendations for balancing the fiscal burden of the state with respect to social security programs with its other obligations. They can be divided majorly in four parts:

*First*, fiscal: examining the interaction among increasing government expenditures, growth of Gross Domestic Product, and the increasing dependency ratio. *Second*, market responsiveness: facilitating labor markets to respond flexibly to changing demographics. *Third*, active aging: encouraging people to remain active and independent as they age. *Four*, responsibilities: examining the balance between collective and individual responsibilities, the respective roles of the public and the state.

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*Many other studies have shown that many people who either live far from pension collection centres, or suffer from any infirmity have to hire some form of transportation to ferry them to-and-fro which in turn reduces the final pension amount.*

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# Tackling Elder Abuse in India

IN CONVERSATION WITH MS. ISHA SHARMA

*Q. According to World Health Organization, a 2017 study shows that 15.7 % of the elderly above 60 years have experienced some form of abuse. Can you elaborate on the issue of elder abuse in India and the work the organization for Youth and Elderly have done to mitigate it?*

The Elderly community in India is subject to exploitation and abuse which may be physical, psychological, sexual or even financial. Neglect is also a form of abuse for the elderly. The elderly however are sometimes unable to identify behaviors or instances of abuse and even when they do recognize mistreatment, they are hesitant to speak of it either due to the fear of becoming burdensome to their children or because they often feel that they themselves are at fault.

The 'Ashvaasan' initiative of the Organization for the Youth and Elderly (OYE) aims to create awareness among the elderly community on the various issues they may face, be it common diseases of old age - dementia or Alzheimer's - economic instability or elderly abuse; and also provides avenues for aid.

We first carry out field research to identify the major issues faced by the elderly community, we then develop a plan of action and campaigns based on the issue faced, thereby following a need-based approach in providing support to the elderly community.



**Ms. Isha Sharma**

*General Secretary*

*Organisation for Youth and Elderly (OYE)*

We have a dedicated helpline and chat support for the elderly who are victims of abuse. At OYE we believe that to effectively provide aid to the elderly it is most essential to first listen.

*Q. The elderly community is subject to different forms of abuse- physical, psychological, emotional and financial. What is financial abuse and how does it affect the victim of such abuse?*

We believe that care begins at home however it is at home that the elderly community are most vulnerable to economic or financial abuse. There have been several instances of forgery of will, property mismanagement or even economic exploitation of the elderly. They even become susceptible to misinformation and are often misguided into making fraudulent investments.

## TALK POINT

Under such instances, victims of financial abuse become extremely fearful and are often helpless since they are unaware of avenues of redress; when they are aware, these avenues are inaccessible.

Most of the elderly who become victims of economic abuse, are completely unaware that they are being or have been abused. Identification is not possible if there is no awareness of the existence of perpetration of such abuse. Awareness is a pre-requisite for caution.

At ‘Ashvaasan’ we provide expert legal advice to the elderly who have to make investment decisions in order to ensure that they are protected from financial abuse, from their families, communities or corporations.

*Q. According to WHO only 1 in 24 cases of elder abuse have been reported. What are some of the factors which prevent the elderly who are victims of abuse from reporting their abuse? What are the remedies available to the elderly under instances of abuse? What can the youth do to ameliorate their condition?*

The elderly community is deterred from reporting instances of abuse by a host of barriers which include the fear or threat to their own life, the fear of reporting-induced exemplification of abuse, the long, aggressive and cumbersome procedure involved in resolution or the fact of simply being unaware of avenues of aid.

Most victims are of the opinion that they would rather spend the little time left in their life with their family or in their homes in peace, instead of spending their time and energy going for court hearings.

We at OYE, encourage the victims of elderly abuse to take legal action and provide support and guidance to them throughout the entire process. We make sure that they obtain the right information at the right time and educate them on the means to prevent and report abuse.

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***Digital literacy is important for the elderly because this increases their access to information and aid in times of dire need.***

## TALK POINT

One of the major problems faced by the elderly in this increasingly digital world, is that they are not digitally savvy. Digital literacy is important for the elderly because this increases their access to information and aid in times of dire need.

Therefore, one thing that the youth can do for the elderly to make them more equipped to deal with and report instances of abuse, is to help them and teach them how to better use devices, how to access helplines, apps and other available aids.



*Ms Isha Sharma is the General Secretary at the Organization for Youth and Elderly. OYE, as an NGO, stands out due its peculiarities & exquisite uniqueness that includes an additional effort of involving the massive youth population into its activities. Through its ongoing events and campaigns, OYE continues to triumph in earning a positive response from people of all age groups.*



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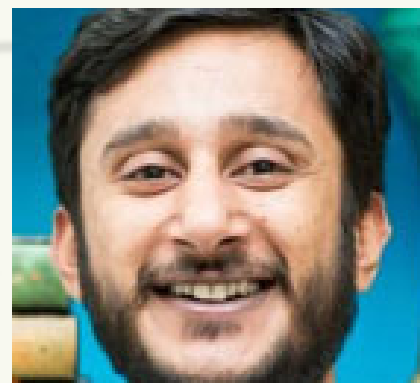
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