Building a Knowledge Base to Bring Indian Elderly at the Centre Stage

Highlights of an Ongoing Multidimensional Research and Advocacy Project by the UNFPA

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Building a Knowledge Base on Population Ageing in India (BKPAI)

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Demographic parameters of several major states in the country are fast changing to accelerate societal ageing in India,

and the next two slides suggest:

(i) low levels of fertility in close to 50% of the major states and
(ii) Expected length of survival after reaching age 60 is significantly large.

Both indicate rapid societal ageing; much faster than historically experienced by most developed countries.
Major States with **TFR Below or Close to Replacement Level**, SRS, 2012

<table>
<thead>
<tr>
<th>States</th>
<th>TFR (average number of children born in reproductive life span)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Andhra Pradesh (including Telangana)</td>
<td>1.8</td>
</tr>
<tr>
<td>Himachal Pradesh</td>
<td>1.7</td>
</tr>
<tr>
<td>Jammu &amp; Kashmir</td>
<td>1.9</td>
</tr>
<tr>
<td>Karnataka</td>
<td>1.9</td>
</tr>
<tr>
<td>Kerala</td>
<td>1.7</td>
</tr>
<tr>
<td>Maharashtra</td>
<td>1.8</td>
</tr>
<tr>
<td>Punjab</td>
<td>1.7</td>
</tr>
<tr>
<td>Tamil Nadu</td>
<td>1.7</td>
</tr>
<tr>
<td>West Bengal</td>
<td>1.7</td>
</tr>
<tr>
<td>Odisha</td>
<td>2.1</td>
</tr>
<tr>
<td>All India</td>
<td>2.4</td>
</tr>
<tr>
<td>Gujarat and Haryana</td>
<td>2.3</td>
</tr>
<tr>
<td>Assam</td>
<td>2.4</td>
</tr>
</tbody>
</table>
Gender-wise Life Expectancy after age 60: 2011 (SRS)

Higher Life Expectancy of Women Indicate Feminization & Widowhood

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>60-65</td>
<td>16.5</td>
<td>18.6</td>
</tr>
<tr>
<td>65-70</td>
<td>13.4</td>
<td>15.0</td>
</tr>
<tr>
<td>70-75</td>
<td>10.7</td>
<td>12.0</td>
</tr>
<tr>
<td>75-80</td>
<td>8.5</td>
<td>9.5</td>
</tr>
<tr>
<td>80-85</td>
<td>6.9</td>
<td>7.5</td>
</tr>
<tr>
<td>85+</td>
<td>5.5</td>
<td>5.9</td>
</tr>
</tbody>
</table>
Preceding tables not only suggest rapid ageing & greater visibility of persons in 70s and 80s, they as well suggest several collaterals including:

feminization of ageing, widowhood, rising demand for various resources from elderly – e.g. income, health and all other forms of securities.

All this happens against the backdrop of the country’s reformist economy, liberal market regime, decadence of traditional values, downsizing of families, changes in living arrangement, migration of younger population, reversal in women’s role from care provider to bread earner, jobless economic growth as revealed by low employment elasticity, informalization of labour market and inadequate public transfers to older people.

These changes and their consequences for the country are yet to be fully recognized. Perhaps for lack of knowledge and limited data base on ageing and its attendant issues.

The UNFPA’s Project “Building a Knowledge Base on Population Ageing in India (BKPAI)” was initiated in response to many of those issues.
Highlights of the UNFPA’s Multidimensional and Multi-partnered Project:

*Building a Knowledge Base on Population Ageing in India (BKPAI)*
*Project Initiated Late 2009*

Rest of the presentation describes a few basic details about the project and its findings drawn by using both primary as well as secondary data analyses.

It may well be recognized that elderly population in India is projected to grow from 104 million in 2011 to about 300 million in 2050 – a staggering rise over a short span of 40 years.
About the Project: A multi-partnered collaborative effort between UNFPA and:

- Institute for Social and Economic change (ISEC), Bangalore
- Institute of Economic Growth (IEG), Delhi
- Tata Institute of Social Sciences (TISS), Mumbai

Objectives of the Project: To build a comprehensive knowledge and data base on socio-economic, demographic, health and financial conditions of elderly population to help in evolving public responses to ageing, and create wider understanding through sustained advocacies about ageing and its issues among stakeholders including media, corporate entities, politicians, NGOs, etc.

Phases of the Project:

Phase 1: Analysis of secondary data: a book “Population Ageing in India” by Cambridge Univ. Press is already out.

Phase 2: Primary data collection on elderly issues from 7 rapidly ageing states and analyses.
Contents of the Book

List of Figures, List of Tables
Preface
Acknowledgements

Introduction: G. Gridehr, K.M. Sathya, K.S. James

1. Deographics of Population Ageing, Lekha Subaiya & D. W. Bansod


3. Living Arrangements of Elderly in India: Policy and Programmatic Implications, K.M. Sathyanarayana, S. Kumar and K.S. James

4. Health Status of Elderly in India: Trends and Differentials, Moneer Alam and Anup Karan

5. The National Policy for Older Person: Critical Issues and Implementation, S. Irudaya Rajan and U.S. Mishra

6. Policy Initiatives on Population Ageing in Select Asian Countries and Their Relevance to the Indian Context, Mala Kapur Shankardass

7. Studies on Ageing in India: A Review, S. Siva Raju

12/10/2014
Primary Data Collection: Survey of Households with Co-residing Elderly
Time of Survey: May – September 2011

Sample States: (i) Kerala, (ii) Tamil Nadu, (iii) Maharashtra, (iv) Himachal Pr. (v) Punjab, (vi) Odisha, and (vii) West Bengal

Sample Size: 1280 households from each state

No. of Sample Households: 8329 (each with at least one elderly member).

No. of Sample Elderly: 9852 (4672 males & 5180 females).

Survey Instruments: (i) Household Schedules, and (ii) Elderly Questionnaire, only elderly respondents.

Publication and Dissemination of Survey Findings:

Total 8 reports including a combined report for all the seven states. In addition, 7 reports separately for each state. 5 reports are already available on UNFPA’s website.
Issues Covered

Both - State-wise and combined reports - followed more or less a similar pattern and contents.

Major themes/issues include:

- Socio-economic and Demographic Profile of sample Households & Elderly
- Work and Income Status of Elderly
- Living Arrangement and Familial Relations
- Subjective Wellbeing (GHQ/SUBI & SAH), Health and Health Care Utilization
- Elderly Awareness and Utilization of Social Security Schemes (this led us to suggest gaps between awareness and utilization of various public schemes).
- Way forward and improvements in programme implementation.
Aged & Elderly HHs: A Few Key Findings

1. Poor Household amenities; especially very low toilet facilities in elderly HHs.
2. Low educational attainment, particularly among elderly women.
3. Majority of women (60%) widows; this share increases with age.
4. Among the working elderly (24.2%), 71 percent work for survival suggesting inadequate financial flows from public & private sources.
5. 43% of elderly have no income at all; elderly women are close to 60%.
6. 6% of elderly live alone; women surpass men.
7. 16% of elderly live with their spouse.
8. Two-thirds of elderly (65%) suffer from at least one chronic disease.
9. Only half of total elderly have good mental health.
10. Only 1.5% elderly are insured to cover health risks.
11. Large gap between awareness (78.5%) and access (13.4%) to old age pension scheme.
12. 11.4% of the sample elderly have experienced abuse after reaching 60. Verbal abuse most common.
Where Do We Go From Here?

• The way forward for us now is to expand our attempts to create awareness about the ageing issues in the country, its challenges and how to convert these changes into opportunity.

The TAC and the mandarins of this project advised us to:

1. Retitle the project “Increase Awareness, Access and Quality of Elderly Services”.

2. The project now seeks to bring a strong component of advocacy by engaging with: (i) Policy makers, (ii) media, (iii) corporate sector (to include ageing as part of their corporate social responsibility), (iv) political leadership (through letting them realize the potentials of elderly as fastest growing vote bank), and (v) all other stakeholders including NGOs and elderly groups to act as pressure group.

3. Sharing of BKPAI data, mentoring of young researchers & a dedicated web site.

4. All this in addition to research and collection of additional data.