Report for "National-level Ageing Perspectives Symposium: Navigating Policies, Wellness, and Research for a Healthier Tomorrow"

National-level Ageing Perspectives Symposium: Navigating Policies, Wellness, and Research for a Healthier Tomorrow

1. Date and place

March 15-16th, 2024 at International Institute of Health Management Research (IIHMR), Plot No.-3, Sector-18A, Dwarka, New Delhi-110075, India

2. Introduction

In India, there is a significant change happening in the population as people are growing older, which is causing various shifts and challenges across society. This demographic transformation, characterized by a gradual increase in the proportion of senior citizens, is evidence to the remarkable steps made in healthcare, where advancements in medical science have extended life expectancies, granting individuals the gift of longevity. Yet, alongside this progress, there unfolds a complex narrative of evolving family structures, marked by the gradual erosion of traditional norms and the rise of more dynamic familial arrangements. Simultaneously, the socio-economic aspect of the nation undergoes a metamorphosis, driven by globalization, urbanization, and technological advancement, all of which contribute to a shifting landscape where the needs and concerns of the elderly occupy a pivotal position.

In this era of demographic transition, where the greying of the population becomes increasingly pronounced, there emerges a pressing need for a comprehensive understanding of the multitude issues confronting the elderly. From healthcare accessibility and affordability to financial planning, mental and physical health issues and legal frameworks tailored to their unique needs, these challenges underscore the imperative for proactive and informed action. As a response to these multifaceted challenges, the national level symposium Recognizing the gravity of these issues and the imperative to address them holistically, the International Institute of Health Management Research (IIHMR) - Delhi, in collaboration with the National Institute of Social Defence under the Ministry of Social Justice and Empowerment, Government of India, has organised two-day national-level symposium "Ageing Perspectives Symposium: Navigating Policies, Wellness, and Research for a Healthier Tomorrow."

This symposium exceeds the sphere of mere discourse; it represents an example of enlightenment amidst the complexities of geriatric care, serving as a catalyst for transformative change. Through a concerted effort to promote awareness, disseminate knowledge, and foster collaboration, the symposium endeavours to empower individuals, caregivers, and communities alike. By illuminating the pathways towards a more

equitable and inclusive future for the elderly, it tried to chart a course where the challenges posed by an ageing population are met with resilience and innovation, and where the opportunities it presents are embraced with optimism and foresight.

The symposium stands as a testament to our shared commitment to the well-being and dignity of our elderly citizens. It is evidence to the resilience of the human spirit and the power of collective action to effect positive change. Through shared knowledge and collaborative endeavour, we aspire to create a future where the golden years of our elders are not just a time of leisure, but a period of fulfilment, contribution, and celebration, enriching the tapestry of our nation with their wisdom, experience, and enduring legacy.

3. Background of the programme

The symposium serves as a platform to shed light on the multifaceted aspects of ageing in India. Over the course of two days, a series of expert-led sessions provided insights into the intricate dynamics of India's ageing population. Key themes explored included evolving demographics, governmental initiatives, active ageing principles, and the pivotal role of NGOs. Additionally, the symposium delved into ageing research in India, offering a nuanced understanding of professional perspectives, mental health complexities, and optimal health practices for seniors. By fostering a deeper comprehension of these issues, the symposium aimed to challenge stereotypes associated with ageing and create a unified narrative. IIHMR believes that participants gained invaluable knowledge and insights during the two-day program, enabling them to contribute meaningfully to the holistic well-being of the elderly population. This proactive and informed approach transcends traditional perceptions, embracing the challenges and opportunities presented by an ageing society.

4. Aim and objectives of the programme

The main aim of the programme is to provide a comprehensive platform for participants from national level to gain insights into various facets of ageing in India, fostering a holistic understanding of the challenges and opportunities associated with an ageing population. To fulfil the broader aim, the specific objectives are as follows:

(i) Comprehensive Understanding: Equip participants with a comprehensive understanding of the challenges and opportunities associated with India's ageing population, covering demographics, government policies, physical activity, support systems, and research landscape.

(ii) Skill Enhancement: Enhance the skills of professionals and caregivers by providing insights into government policies, mental health complexities, nutrition, and stroke prevention, empowering them to contribute effectively to the well-being of senior citizens.

(iii) Collaborative Network Building: Facilitate collaboration and networking among participants, fostering a community of individuals, organizations, and researchers dedicated to addressing the needs of the ageing population in India.

(iv) Actionable Strategies: Develop actionable strategies and recommendations based on global insights and expert discussions, enabling participants to implement effective measures for the care, support, and healthy ageing of senior citizens in India.

5. Target groups

- Professors and faculty members
- Graduate and post-graduate students
- Research scholars interested in contributing to the well-being of the elderly population
- Family, friends and professional caregivers providing support and care for elderly population
- NGO functionaries responsible for planning, implementing, and managing healthcare programs
- Senior citizens

6. Session-wise programme schedule

This section provides a comprehensive overview of the sessions scheduled day by day, along with summaries of the resource persons and their respective topics. However, please note that the detailed program agenda is provided as **Annexure 1**, while the profiles of the resource persons are included as **Annexure 2**. IIHMRD has planned a two-day national-level program, dividing each day into two sessions.

Day 1

Registration and inaugural session: Day 1 begins at 9 am with registration for the participants, which was open for one hour. Then the event started followed by the inaugural session with the lighting of the lamp and Saraswati Vandana. The welcome address was delivered by the Organizing Secretary, Dr. Sayani Das, Assistant Professor, IIHMRD, followed by the keynote address by the Convenor, Dr. Preetha G. S., Professor and Research Dean, IIHMRD, and opening remarks by the Trustee Secretary, Dr. S. D. Gupta, Trustee Secretary, IIHMR.

Poster presentation: The first session started at 10:40 am at the IIHMRD main hall at the basement, with a parallel session for poster presentations by the participants at the MDP hall. It may be noted that for poster presentations, participants had already submitted their abstract beforehand through a link shared on several social media platforms and attached in brochures during the event's marketing. After receiving an enormous number of abstracts by the stipulated deadline of 05.03.2024, the review committee from IIHMRD selected

eleven best abstracts and informed the selected participants on 08.03.2024, providing details of e-poster size along with rules and regulations. The abstract book is attached as **Annexure 3**.

Session 1: Session 1 was chaired by Dr. Divya Aggarwal, Associate Dean, and Assistant Professor, IIHMRD, with Co-Chair Dr. Sayani Das, Assistant Professor, IIHMRD.

The first resource person was <u>Dr. Aabha Chaudhary, Chairperson of RRTC, Anugraha, New Delhi</u>, who spoke on 'Empowering Elders: Upholding Dignity in Ageing'. Drawing from her 24-year journey, Dr. Chaudhary illuminated key insights, notably from her research and work experiences in different field settings, especially focusing on issues faced by older women. She emphasized various government initiatives, policies, and schemes, spotlighting the formidable challenges confronting rural elders, such as social isolation and health issues, exacerbated by inadequate support systems and financial aid, particularly in light of the majority being illiterate. Dr. Chaudhary advocated for revised policies, digitalization, and community-driven self-help schemes, alongside proactive measures like preventive care and community support, stressing the importance of education and awareness to ensure dignity, health, and community support as essential rights for every elder.

The second resource person was <u>Dr. Ritu Rana, Mission Head, Help Age India, New Delhi</u>, spoke on 'NGOs as Pillars of Support: Exploring their Crucial Role in the Care and Well-being of the Aged'. Dr. Rana delivered an enlightening session underscoring the pivotal role of NGOs, particularly HelpAge India, in supporting the well-being of the elderly, leveraging their 45 years of expertise. Addressing prevalent health challenges affecting older adults, she highlighted initiatives like NITI Aayog's senior care reforms and advocated for enhanced education in geriatric medicine. Dr. Rana commended Uttar Pradesh's progress in establishing old age homes and proposed nationwide replication. Stressing community empowerment, she outlined HelpAge's impactful programs like "School and Value Ageing" while delineating NGO interventions spanning elder care facilities, mobile medical units, and technology-enabled solutions. Dr. Rana emphasized the imperative for elder-friendly infrastructure and comprehensive care, citing HelpAge's innovative use of technology and advocacy efforts.

The third resource person was <u>Dr. Shivani Chandel, Associate Professor, Department of Anthropology, University of Delhi, New Delhi</u>, spoke on 'Physical Activity in Ageing: Steps Towards Healthy Longevity and Well-being'. Dr. Chandel delivered an insightful session on the paramount importance of physical activity in the ageing process, advocating for its integration into daily life to foster healthy longevity and overall well-being. Distinguishing between mere activity and achieving fitness, she stressed the early

adoption of physical activities to positively shape one's ageing trajectory, particularly highlighting the crucial role of muscular fitness in staving off cardiovascular diseases. Dr. Chandel challenged conventional health metrics like BMI, advocating for a focus on body fat percentage and emphasizing the significance of flexibility. She underscored the need for raising awareness about the pivotal role of physical activities in mitigating old-age disabilities, introducing concepts like NEAT and advocating for the minimization of sedentary behaviour. Addressing recommended activity levels for older adults and the interconnectedness of physical, mental, and social well-being, she concluded by emphasizing that holistic health in ageing is attainable through the integration of all aspects of fitness into daily routines.

The fourth and last resource person of the session was <u>Dr. G. S. Grewal, Consultant, Fortis Escorts Hospital,</u> spoke on 'Geriatric Health: A Medical Perspective on Ageing Well'. Dr. Grewal shared insightful perspectives on healthy ageing, emphasizing the unfairness of age-based judgments and the significance of gerontology in understanding the ageing process. Highlighting global demographic shifts towards an ageing population, he discussed gender disparities in life expectancy and the reluctance of women to seek help when needed. Dr. Grewal categorized older adults by age groups and addressed prevalent health concerns such as inadequate nutrition, memory issues, loneliness, and technological challenges. Stressing the importance of access to healthcare, social connections, and a supportive environment, he introduced the Comprehensive Geriatric Assessment as a valuable tool for improving elder care. Additionally, he exposed the myth that keeping older individuals employed hinders younger generations' job opportunities, emphasizing that proactive self-care and community support are key to maintaining health and happiness in older age.

Nukkad Natak: In between session 1 and session 2, IIHMR organized a nukkad natak performed by the IIHMRD's students, entitled 'Embracing the Golden Years with Dignity'. It emphasized on intergenerational bonding, the importance of including older adults in the workforce, using the experiences of older adults in daily life and work culture for better results, and maintaining their dignity.

Session 2: Session 2 was chaired by Dr. Anandhi Ramachandran, Professor, IIHMRD, with Co-Chair Ms. Anuradha Bhardwaj, Assistant Professor, IIHMRD.

The first resource person of the session was <u>Dr. Pradeep Kumar Pandey, Consultant, National Health Authority (NHA), Government of India,</u> presented on 'Healthcare Packages under PMJAY for older adults'. The presentation elucidated the Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (ABPM-JY) as a pivotal initiative striving towards universal health coverage in India. Emphasizing alignment with national

health policies and Sustainable Development Goals (SDGs), the scheme targets the healthcare needs of the bottom 40% of the population, offering crucial financial protection against catastrophic expenses and reducing out-of-pocket burdens. With comprehensive health insurance coverage, portability across states, and a significant number of empanelled hospitals, both public and private, the ABPM-JY scheme stands as a beacon of equitable healthcare access. The implementation modes, evolving health benefit package (HBP), and flexibility for states in designing packages underscore the scheme's adaptability and effectiveness. Notably, data on the utilization of procedures for older adults demonstrates its tangible impact on addressing prevalent health issues within this demographic. Overall, the ABPM-JY scheme represents a significant stride towards improving healthcare accessibility, alleviating financial constraints, and fostering health equity across India.

The second resource person of the session was Dr. Sanjay Sharma, CEO, Association for Transgender Health of India (ATHI), Delhi, presented on "Challenges of Aging in Transgender and Gender Diverse Individuals: The Untold Story". Dr. Sharma addressed the pressing challenges confronting transgender and gender diverse individuals as they age, spotlighting issues ranging from transphobia and discrimination in healthcare settings to limited access to crucial resources like pensions and insurance. Emphasizing the imperative of inclusive healthcare policies and societal support, Dr. Sharma underscored the necessity of recognizing and addressing the unique needs of this demographic. They advocate for education, policy reforms, and holistic healthcare approaches to bridge existing gaps. Dr. Sharma calls for collaborative action across government, academia, and international agencies to ensure the inclusion of transgender and gender diverse individuals in ageing-related initiatives. Furthermore, they advocate for the development of a comprehensive health manual tailored to transgender healthcare needs, emphasizing the urgency of combating transism and fostering inclusivity across all facets of ageing-related discourse and policy formulation.

The last speaker of the session was Mr. Naveen Vashist, Business Head at Emoha, Delhi, presented on 'Urban Care Management: Addressing Challenges and Innovations for Sustainable Communities'. Mr Vashisht highlighted positive strides in urban elder care management, acknowledging challenges while emphasizing innovations. He cited virtual engagements, elder care startups, and assisted living facilities as positive developments. Mr Vashisht underscored the importance of tailored healthcare services for the elderly and community engagement initiatives. He also noted the role of real estate projects in promoting active ageing. Urging comprehensive elder care policies prioritizing dignity and well-being, Vashisht expressed optimism for the future and urged continued investment in innovative solutions.

Day 2

Registration: Day 2 begins at 10 am with the registration of the participants, ensuring their presence on both days, which was a criterion for the successful completion of the event and obtaining certificates.

Session 3: Session 3 was chaired by Dr. Vinay Tripathi, Associate Professor, IIHMRD, with co-chaired by Dr. Mukesh R Raushan, Assistant Professor, IIHMRD.

The first resource person of the session was Dr. Sanjiv Kumar, Chairperson, Advisory Committee- Indian Alliance of Patients Group, who spoke on 'Towards an Inclusive Future: Health Policy and Its Impact on Senior Citizens'. Dr. Kumar highlighted that the elderly population in India is set to substantially increase, necessitating preparedness for the challenges ahead. He emphasized on Ageism, a form of discrimination based on age, which persists in society, manifesting in stereotypes and disadvantages faced by the elderly. Combatting ageism requires policy and legal measures, educational initiatives, and intergenerational interventions. The importance of health policy for senior citizens gained prominence with the National Health Policy (NHP) 2017, emphasizing political prioritization, a life course approach to health, social justice considerations, and an intersectoral approach to healthcare also explained by Dr. Kumar. He mentioned that Health equity for senior citizens is a crucial aspect addressed within the framework of Health in All Policies, aligning with Sustainable Development Goal 3's focus on universal health coverage. He emphasized that Institutions like IIHMR play a vital role in improving geriatric care through academia, research, prevention, and early diagnosis efforts, thereby contributing to the overall health and well-being of the elderly population. Effective implementation strategies are essential to ensure that health programs reach and benefit all segments of society, particularly the elderly, to fulfil their needs and improve their quality of life.

The second resource person was Dr. Dharmesh Lal, Scientist E, Indian Council of Medical Research, New Delhi, who spoke on 'Addressing NCDs in Senior Citizens: Strategies for Prevention, Management, and Improved Quality of Life'. Dr. Lal highlighted the escalating burden of Non-Communicable Diseases (NCDs), which currently contribute to nearly two-thirds of all diseases, with India's elderly population facing significant healthcare challenges. Predominantly comprised of females, this demographic, especially in rural areas, encounters unique issues necessitating tailored strategies. The speaker identified various challenges affecting elderly healthcare, including physical disabilities, socioeconomic neglect, lack of proper gerontological strategies, and dietary concerns. Despite the magnitude of the elderly population in India, there remains a dearth of institutional-level clinical resources and screening mechanisms for NCDs,

with cardiovascular diseases posing the highest mortality risk. Dr. Lal advocated for research-driven strategies to promote healthy ageing and maintain functional abilities, stressing the importance of quality of life and implementing national healthcare programs tailored for the elderly. He emphasized the need for dedicated funding, communication strategies, policy implementations, health system strengthening, and technological interventions to effectively manage NCDs in senior citizens. However, he cautioned against the alarming under-allocation of the health budget towards IT solutions, highlighting the urgent need for improvement in this area.

The third resource person was <u>Dr. Sangram K Patel, Deputy Director, Population Council Institute, New Delhi</u>, who presented on 'Navigating the Demographic Shift: Understanding Ageing Trends in India and South Asia'. Dr. Patel's presentation delved into the intricacies of ageing, elucidating its biological underpinnings and the global implications of demographic shifts. Patel emphasized the significance of studying ageing due to its far-reaching effects on demographic trends, healthcare systems, economic landscapes, interdisciplinary research, quality of life, and policy considerations. Highlighting global ageing trends, he noted the exponential growth in the elderly population, with projections indicating a significant increase in individuals aged 65 or older worldwide. Discussing the implications of ageing on different regions, Patel illustrated shifts in age structures, median ages, and demographic dividends, particularly focusing on South Asia. He pointed out the varying percentages of elderly populations across South Asian countries, with projections highlighting India's substantial increase in the elderly population by 2050. Moreover, Patel highlighted emerging issues among the ageing population, including healthcare services, long-term care, living arrangements, income, social security, and protection against abuse. He underscored the need for proactive measures to address the evolving needs of ageing populations, particularly in South Asia, where a significant demographic shift is anticipated by 2050.

The last speaker of the session was <u>Dr. Mayanka Gupta, Assistant Professor, Lady Irwin College, University of Delhi</u>, who presented on 'Enhancing Quality of Life for Elderly Residents in Old Age Homes: Challenges, Innovations, and Best Practices'. Dr. Gupta's presentation explores global terminology for old age, focusing on 'older adults' for publication. She discusses two main types of elderly institutionalization, highlighting variations worldwide. Drawing from her US exchange experience, Dr Gupta shares insights on elder care programs, emphasizing focused daycare centers' importance. She traces India's transition from traditional family care to institutional care and advocates for further research. Dr Gupta notes the rise of assisted living globally and the dichotomy in Indian old age homes. She proposes strategies like establishing schools for the elderly and counselling initiatives. Dr Gupta stresses the need for tailored programs addressing physical, social, and economic dimensions of elderly well-being.

Session 4: Session 4 has been divided into two sections: one is a panel discussion, and another is the voice of elders. The panel discussion was chaired by Mr. Saumyajit Roy, co-founder Emoha Elder care, Delhi. The topic of the panel was 'Silver Tsunami: an Opportunity and Not a Challenge'.

The first resource person was <u>Adv. Nidhi Jhawar from the Lex Chambers, Legal Expert, Delhi</u>. Ms. Jhawar commenced her speech by addressing the legal framework concerning the elderly population, emphasizing the necessity of legal awareness among this demographic. She highlighted the role of government policies and regulations in safeguarding the rights and interests of the elderly. Adv. Jhawar stressed the significance of community support and engagement in advocating for elderly rights and accessing legal resources. Moreover, she pointed out the prevalent lack of knowledge regarding legal awareness among the elderly, underscoring the need for concerted efforts to bridge this gap and empower them with essential legal information and resources.

The second resource person was <u>Ms. Prasita Nair from the Epoch Elder Care, Delhi</u>. Ms. Prasita Nair, in her address, shared her journey from serving in the Indian Army to finding purpose in caring for elders, particularly those with dementia, with Epoch Elder Care. Recognizing the lack of awareness about dementia in India, she emphasized the importance of proper understanding and care for individuals experiencing memory issues beyond the age of 60. She highlighted the necessity for extensive training for caregivers to effectively manage dementia, addressing everything from communication to medication and activities tailored to the patients' needs. Ms Nair stressed the need for more support and resources for dementia care in India, including a greater number of geriatric doctors. She recounted a poignant incident in a hospital where a dementia patient struggled to communicate with a doctor, shedding light on the difficulties faced by such individuals in medical settings.

The third resource person was <u>Prof. (Dr.) Abha Singh, Consulting Psychologist, Delhi</u>. Dr. Singh discussed her research on the elderly population of India, particularly focusing on Alzheimer's disease patients. She challenged traditional practices by advocating for the inclusion of elderly family members in activities like cooking if they enjoy it. Dr. Singh also highlighted the MULE app as a tool for seniors to create music videos and connect with others, underscoring the positive impact of music on mental well-being. She addressed the modern trend of elders living separately from their families, contrasting it with their comfort in living with pets. Dr. Singh touched upon policies and strategies for wellness promotion, emphasizing the importance of mental health alongside physical well-being. She concluded by stressing the need to prioritize health promotion over sickness management.

The last resource person of the panel discussion was Mr. Harish Chawla from Hope Ek A.S.H.A, Delhi. He himself a senior citizen, who still working in this area. Therefore, he shared his area of expertise, experiences as well as challenges related to the same. Mr. Chawla highlighted the role of NGO functionaries to improve the role of senior citizens in India.

Voice of the Elder: The next part of the session 4 was Voice of the Elder- वयस्क की आवाज़: अनुभव साझा करने का संवाद, which was moderated by Ms. Ritu Batra, Emoha Elder care, Delhi. This was an interactive session with experiences shared by seven older adults, motivation of their life and activities like dancing and singing performed by the older adults makes the symposium more enlightening.

Valedictory and closing remarks: The two-day event concluded with a valedictory session by the organizing committee, including the distribution of certificates to all participants, certificates and mementos distribution to speakers, chairs, and co-chairs, as well as certificate and prize distribution to winners of e-poster presentation. The organizing team of the event comprised Dr. Sutapa B Neogi, Director IIHMRD, Dr. Preetha G. S., Professor and Research Dean, IIHMRD, Dr. Divya Aggarwal, Associate Dean & Assistant Professor, IIHMRD, Dr. Vinay Tripathi, Associate Professor, IIHMRD, Dr. Sumant Swain, Assistant Professor, IIHMRD, and Dr. Sayani Das, Assistant Professor, IIHMRD. Closing remarks and vote of thanks were delivered by Dr. Divya Aggarwal, Associate Dean & Assistant Professor, IIHMRD.

7. **Methodology of the programme**

The program involved skilled chairs and co-chairs guiding the proceedings to ensure a cohesive and structured flow. They introduced each presentation, providing context for its significance, and facilitated smooth transitions between topics. Throughout the program, the audience actively engaged in exploring key inclusive strategies for older adults. This involvement included participating in focused group activities and live demonstrations aimed at integrating these approaches into real-world scenarios. A key aspect of the moderation approach was to prioritize active audience involvement. This was achieved through interactive Q&A sessions after every presentation, fostering a dynamic and participatory environment that enhanced the overall learning experience.

8. **Output of the programme**

The output of the program is significant, impacting various stakeholders involved in geriatric care in India:

a) Participants gain increased awareness of the specific needs, challenges, and opportunities faced by the elderly population. This fosters a greater sensitivity to mental and physical health issues, equipping attendees with knowledge to better address the holistic well-being of older adults.

b) The symposium serves as a valuable platform for robust networking and collaboration among professionals, organizations, and community members engaged in geriatric care. This facilitates collective efforts to address the evolving landscape of elderly care, encouraging partnerships and shared resources to enhance support systems for seniors.

c) Constructive dialogue on holistic approaches is sparked, encouraging participants to actively contribute to the promotion of age-friendly policies and initiatives in their communities. This fosters a culture of inclusivity and empowerment, paving the way for comprehensive support systems tailored to the needs of the ageing population.

Photographs

Picture 1: Inaugural Session

Picture 2: National Level Symposium Session 1

Picture 3: Nukkad Natak-Embracing the Golden Years with Dignity

Picture 4: Poster Presentation at IIHMRD MDP Hall

Picture 5: National Level Symposium Session 2

Picture 6: Group Picture- Day 1

Picture 7: National Level Symposium Session 3

Picture 8: National Level Symposium Session 4- Panell Discussion

Picture 9: National Level Symposium Session 4- Voice of Elders

Picture 10: Group Picture-Day 2

Picture 11: Audience at the National-Level Symposium

Picture 12: Integrative session with audience at the Symposium

National-level Ageing Perspectives Symposium: Navigating Policies, Wellness, and Research for a Healthier Tomorrow

March 15-16, 2024 Venue: International Institute of Health Management Research (IIHMR), New Delhi	
DAY 1	
9.00 am – 10.00 am	**Registration**
10.00 am – 10.20 am	**Inaugural Session**
10.00 am – 10.02 am	Lighting of the lamp and Saraswati Vandana
10.02 am – 10.05 am	Welcome address by the Organizing Secretary — Dr Sayani Das, Assistant Professor, IIHMRD
10.05 am – 10.10 am	Keynote address by the Convenor — Dr Preetha G. S., Professor and Research Dean, IIHMRD
10.10 am – 10.20 am	Opening remarks by the Trustee Secretary — Dr S D Gupta, Trustee Secretary, IIHMR
10.20 am – 10.40 am	**High Tea**
10.40 am – 1.00 pm	**Session 1** Chair: Dr Divya Aggarwal, Associate Dean and Assistant Professor, IIHMRD Co-Chair: Dr Sayani Das, Assistant Professor, IIHMRD
	Parallel session (at MDP Hall): E-Poster presentation (Theme 3 and 5) Chair: Dr Anandhi Ramachandran, Professor, IIHMRD Co-Chair: Dr Vinay Tripathi, Associate Professor, IIHMRD
10.40 am – 11.10 am	Empowering Elders: Upholding Dignity in Ageing — Dr Aabha Chaudhary, Chairperson of RRTC, Anugraha, New Delhi
11.10 am – 11.40 am	NGOs as Pillars of Support: Exploring their Crucial Role in the Care and Well-being of the Aged — Dr Ritu Rana, Mission Head, Help Age India, New Delhi
11.40 am – 12.10 pm	Physical Activity in Ageing: Steps Towards Healthy Longevity and Well-being — Dr Shivani Chandel, Associate Professor, Department of Anthropology, University of Delhi, New Delhi
12.10 pm – 12.40 pm	Geriatric Health: A Medical Perspective on Aging Well — Dr G. S Grewal - Consultant Fortis Escorts Hospital
12.40 pm – 1.00 pm	Q & A
1.00 pm – 1.30 pm	**Group Picture**
1.30 pm – 2.30 pm	**Lunch**
2.30 pm – 3.00 pm	**Nukkad Natak: Embracing the Golden Years with Dignity**
3.00 pm – 4.40 pm	**Session 2** Chair: Dr Anandhi Ramachandran, Professor, IIHMRD Co-Chair: Ms. Anuradha Bhardwaj, Assistant Professor, IIHMRD
	Parallel session (at MDP Hall): E-Poster presentation (Theme 1, 2 and 4) Chair: Dr Sumant Swain, Assistant Professor, IIHMRD Co-Chair: Dr. Neha Lakshman, Research Officer, IIHMRD
3.00 pm – 3.30 pm	Healthcare Packages under PMJAY for older adults — Dr. Pradeep Kumar Pandey, Consultant, National Health Authority (NHA)
3.30 pm – 4.00 pm	Challenges of Aging in Transgender and Gender Diverse Individuals: The Untold Story — Dr Sanjay Sharma, CEO, Association for Transgender Health of India (ATHI)
4.00 pm – 4.30 pm	Urban Care Management: Addressing Challenges and Innovations for Sustainable Communities — Mr Naveen Vashist, Business Head at Emoha, and President- IIHMRD Alumni
4.30 pm – 4.40 pm	Q & A
4.40 pm – 5.00 pm	**High Tea**

Day 2	
10.00 am – 10.20 am	**Registration**
10.20 am – 10.40 am	**High Tea**
10.40 am – 1.00 pm	**Session 3** Chair: Dr Vinay Tripathi, Associate Professor, IIHMRD Co-Chair: Dr Mukesh R Raushan, Assistant Professor, IIHMRD

Time	Topic	Speaker
10.40 am – 11.10 am	Towards an Inclusive Future: Health Policy and Its Impact on Senior Citizens	Dr Sanjiv Kumar, Chairperson, Advisory Committee- Indian Alliance of Patients Group, Former Director- IIHMR, Delhi
11.10 am – 11.40 am	Addressing NCDs in Senior Citizens: Strategies for Prevention, Management, and Improved Quality of Life	Dr Dharmesh Lal, Scientist E, Indian Council of Medical Research, New Delhi
11.40 am – 12.10 pm	Navigating the Demographic Shift: Understanding Ageing Trends in India and South Asia	Dr Sangram K Patel, Deputy Director, Population Council Institute, New Delhi
12.10 pm – 12.40 pm	Enhancing Quality of Life for Elderly Residents in Old Age Homes: Challenges, Innovations, and Best Practices	Dr Mayanka Gupta, Assistant Professor, Lady Irwin College, University of Delhi
12.40 pm – 1.00 pm	Q & A	

1.00 pm – 1.30 pm	**Group Picture**
1.30 pm – 2.30 pm	**Lunch**
2.30 pm – 3.30 pm	**Panel Discussion** Moderator: Mr Saumyajit Roy, Co-founder Emoha Elder care
2.30 pm – 3.20 pm	**Silver Tsunami an Opportunity and Not a Challenge** Panellist for the discussion: • Adv. Nidhi Jhawar- Lex Chambers, Legal Expert • Ms. Prasita Nair- Epoch Elder Care • Prof. (Dr.) Abha Singh- Consulting Psychologist • Mr Harish Chawla- Hope Ek A.S.H.A.
3.20 pm – 3.30 pm	Q & A
3.30 pm – 4.00 pm	**Voice of the Elder**- वयस्क की आवाज़: अनुभव साझा करने का संवाद (Moderator: Ms. Ritu Batra, Emoha Elder care)
4.00 pm – 4.35 pm	**Valedictory** by Dr Preetha G. S., Professor and Research Dean, IIHMRD Dr Divya Aggarwal, Associate Dean & Assistant Professor, IIHMRD Dr Vinay Tripathi, Associate Professor, IIHMRD Dr Sumant Swain, Assistant Professor, IIHMRD Dr Sayani Das, Assistant Professor, IIHMRD
4.35 pm – 4.40 pm	**Vote of Thanks** by Dr Divya Aggarwal, Associate Dean & Assistant Professor, IIHMRD
4.40 pm – 5.00 pm	**High Tea**

1. **Dr. Aabha Chaudhary** holds a PhD in Social Gerontology & Gender Development, obtained from HNB University, Srinagar, Uttaranchal in 2004. Additionally, she completed a Diploma in Social Gerontology at the United Nations International Institute on Ageing in Malta in 2003. Dr. Chaudhary was awarded a Fellowship by the Rotary International Foundation to visit California, USA, in 1997. With extensive experience, Dr. Chaudhary serves as the Founder and Chairperson of the national NGO, 'Anugraha,' since its establishment in 2000. In this role, she has garnered hands-on experience in various aspects of organizational management, including planning, formulation of local intervention plans, direct implementation, monitoring, evaluation, and documentation. Her expertise and dedication contribute significantly to the advancement of initiatives aimed at enhancing the well-being of elderly individuals and promoting gender development within communities.

2. **Dr. Ritu Rana** brings a unique blend of medical expertise and managerial acumen to her role as the Mission Head of Health Care at HelpAge India. With a background in MBBS from GMC Nagpur and a Post Graduation Diploma in Health and Hospital Management from Indira Gandhi National Open University, Dr. Rana is well-equipped to address the complex healthcare needs of marginalized populations. Her previous involvement with the Faculty of Management Studies at the University of Delhi reflects her interdisciplinary approach to healthcare management. As an empanelled National Trainer for elderly and palliative care at the National Health System & Resource Centre, Dr. Rana has demonstrated her commitment to capacity building and skill development in the healthcare sector. Her certification in Integrated Care for Older People (ICOPE) from WHO further underscores her dedication to holistic and patient-centered care. Dr. Rana's prolific publications and co-authorship of books highlight her contributions to advancing knowledge in the field. With her diverse skill set and extensive experience, Dr. Ritu Rana plays a pivotal role in driving initiatives aimed at improving healthcare accessibility and quality for vulnerable communities.

3. **Dr. Shivani Chandel** is an esteemed Associate Professor in the Department of Anthropology, University of Delhi, specializing in Biological Anthropology. With a rich academic background and diverse research interests, Dr. Chandel's expertise spans areas such as Human Growth and Development, Human Ecology, Kinanthropometry and Ergonomics, Physiological Anthropology, Occupational Health, Musculoskeletal Disorders, and Mental Health. She is currently leading a significant research project on older adults as the Project Director, funded by the Indian Council of Social Science Research (ICSSR). Dr. Chandel's extensive experience is reflected in her successful

guidance of 1 MPhil and 4 PhD students, with an additional 6 PhD students currently pursuing their research under her supervision. These students are engaged in exploring a wide range of compelling topics, including Ageing, Adolescent Mental Health, and Sports. Dr. Shivani Chandel's dedication to research and mentorship underscores her significant contributions to the field of Anthropology and her commitment to nurturing the next generation of scholars.

4. **Dr. G.S. Grewal** is a highly respected figure in the field of healthcare, serving in multiple prestigious roles. As the Chairman of Wellness Health and the Honorary Secretary of the Indian Medical Association (IMA) South Delhi Branch, Dr. Grewal plays a crucial role in shaping healthcare policies and initiatives. With a distinguished career spanning nearly five decades, he has served as the Past-President of the Delhi Medical Association, leaving a lasting impact on medical practices and standards in the region. Dr. Grewal's expertise extends to elder care, as he serves as a Senior Consultant in Elder Care at Fortis Escorts Hospital and as the Honorary Secretary of Age-Care India. Additionally, he contributes significantly to the dissemination of knowledge in the field as the Editor-In-Chief of Voice of Elders. With his wealth of experience and dedication to healthcare, Dr. G.S. Grewal continues to make invaluable contributions to the well-being of individuals, particularly the elderly, in India.

5. **Dr. Pradeep Kumar Pandey** is a Consultant at the National Health Authority (NHA), Government of India, where he contributes his expertise to public health initiatives. Dr. Pandey holds a Bachelor's degree in Ayurvedic Medicine & Surgery (B.A.M.S) from Babasaheb Bhimrao Ambedkar University, Muzaffarpur, Bihar. He furthered his education by obtaining an MBA in Hospital Management from Alagappa University, Karaikudi, Tamil Nadu, and a certification in Adolescent Reproductive & Sexual Health (ARSH) from State Health Society Patna in November 2011. With over 19 years of experience in public health, healthcare, and health insurance industries, as well as significant clinical exposure, Dr. Pandey brings a wealth of knowledge and skills to his role. His contributions to various sectors of the healthcare industry and his dedication to improving public health make him a valuable asset to the National Health Authority and the broader healthcare community.

6. **Dr. Sanjay Sharma** is a distinguished healthcare professional, currently serving as the CEO & Managing Director of Association for Transgender Health in India (ATHI). With a notable career in the Armed Forces Medical Services, Dr. Sharma has commanded two Air Force Hospitals and held the prestigious position of the first Consultant Administration. His extensive experience and expertise in healthcare administration have been instrumental in shaping the landscape of medical services. Dr. Sharma's contributions extend beyond national borders, as he serves as a Board Member of the World

Professional Association for Transgender Health (WPATH) and Co-Chair of the WPATH Book Club. He is also a SOC 8 Certified Faculty Member of the Global Education Institute, WPATH, demonstrating his commitment to advancing transgender healthcare globally. In addition to his professional affiliations, Dr. Sharma is a dedicated advocate for LGBTQAI+ rights, actively involved as a member of "Sweekar: The Rainbow Parents," a parent support group for the LGBTQAI+ community. Dr. Sanjay Sharma's leadership, expertise, and advocacy efforts reflect his unwavering commitment to promoting inclusive healthcare and social justice for all.

7. **Mr. Naveen Vashist** is a seasoned professional serving as the Business Head at EMOHA Elder Care. His journey in the healthcare sector began with the attainment of a Post Graduate degree in Hospital and Healthcare Management from IIHMR, New Delhi, in 2012. Since then, Mr. Vashist has had the privilege of collaborating with numerous national and international healthcare organizations, accumulating over 12 years of hands-on experience across various startups. His expertise encompasses a wide range of healthcare initiatives, from advocating for HPV vaccines to prevent cervical cancer to promoting influenza, pneumonia, and shingles vaccines among the elderly. Additionally, Mr. Vashist focuses on ensuring access to travel vaccines for individuals embarking on international journeys. With his wealth of experience and dedication to healthcare advocacy, Mr. Naveen Vashist plays a crucial role in advancing elder care and public health initiatives.

8. **Dr. Sanjiv Kumar** is a highly accomplished professional with a distinguished career in healthcare. Holding an MBBS and MD from AIIMS, New Delhi, as well as a DNB (MCH) from the National Board, Dr. Kumar's educational background exemplifies excellence in medical training. Furthermore, he has augmented his medical expertise with an MBA in Strategic Management from the UK and specialized training in Health Financing and Policy from the London School of Hygiene and Tropical Medicine. Dr. Kumar's extensive experience spans various prestigious roles, including his tenure as the former Director of IIHMR Delhi. His career highlights include a remarkable 22-year tenure with UNICEF, where he worked across diverse regions such as India, Iraq, Kenya, Uganda, Somalia, Bangladesh, and served as a Regional Advisor for 22 countries in Central Asia, Central, Eastern Europe, and the Baltic States. Dr. Kumar's contributions extend beyond his professional roles; he also serves as a WHO trainer for Health in All Policies, demonstrating his commitment to advancing global health initiatives. With his wealth of experience, expertise, and dedication to improving healthcare systems worldwide, Dr. Sanjiv Kumar continues to make significant strides in shaping the landscape of public health.

9. **Dr. Dharmesh Lal** is a prominent figure in the healthcare sector, serving as a Scientist E at the Indian Council of Medical Research (ICMR) in New Delhi. Dr. Lal's educational background includes an MD in Community Health Administration, reflecting his deep understanding of healthcare management and administration. In his role at the government of India's Non-Communicable Diseases division, Dr. Lal plays a pivotal role in shaping policies, strategies, and interventions aimed at addressing and managing healthcare in the country. His specialized expertise in the medical field enables him to make significant contributions to the development and implementation of initiatives that combat non-communicable diseases. Dr. Dharmesh Lal's dedication to improving public health outcomes in India underscores his commitment to serving the well-being of the population and advancing healthcare systems.

10. **Dr. Sangram Kishor Patel** is a highly regarded professional serving as the Deputy Director at the Population Council Institute in New Delhi. Dr. Patel's educational background is extensive, with a PhD and MPS in Population Sciences from IIPS Mumbai, an MSc in Statistics from Sambalpur University, and an MBA in Strategic Management from Bharthiar University. With a diverse skill set and expertise, Dr. Patel has made significant contributions to various fields, including survey research, public health, reproductive, maternal, newborn, child, and adolescent health (RMNCH+A), HIV/AIDS, youth issues, ageing, climate change, clean energy, disaster mitigation, livelihood, gender, women empowerment, burden of diseases, socio-economic, and human development issues. He has played key roles in leading and collaborating on numerous complex monitoring and evaluation-based interventions and surveillance programs, such as the National Rural Health Mission (NRHM). Dr. Patel's multifaceted experience and expertise make him an invaluable asset in addressing pressing societal challenges and advancing population and public health initiatives.

11. **Dr. Mayanka Gupta** is an esteemed Assistant Professor at Lady Irwin College, University of Delhi, where she imparts knowledge and expertise in the field of ageing. Dr. Gupta's educational background includes the completion of a doctoral degree with a focus on the quality of life of senior citizens in old age homes and recreation centers, reflecting her dedication to understanding and improving the well-being of the elderly population. As a prolific author, Dr. Gupta has contributed significantly to the academic literature on ageing, quality of life, institutional care, ageing in place, and intergenerational bonding. Her research papers and articles provide valuable insights into various aspects of elderly care, enriching academic journals and conference proceedings. With over 15 years of experience in teaching, training, and research, particularly in the field of ageing, Dr. Gupta has demonstrated her leadership capabilities. She has played a pivotal role in coordinating ministry-sponsored projects on intergenerational bonding in schools and has organized virtual events for the United Nations

Commission on the Status of Women. Dr. Mayanka Gupta's unwavering commitment to enhancing the understanding and support for the elderly community underscores her invaluable contributions to the field of gerontology and academic research.

12. **Advt. Nidhi Jhawar** is a distinguished legal expert associated with Lex Chambers, bringing forth a wealth of knowledge and experience to the legal domain. Her educational journey includes obtaining a law degree from Symbiosis Law School, Pune, followed by a Masters in Intellectual Property Rights from a prestigious collaboration between the World Intellectual Property Organization and the University of Turin, Italy. With a strong foundation in legal education, Advt. Nidhi Jhawar has accumulated extensive experience in the Indian policy sphere. Her prior engagements have equipped her with valuable insights into the intricacies of the legal framework, enabling her to navigate complex legal landscapes with finesse. Known for her ability to deliver insightful counsel and innovative solutions, she adeptly caters to the diverse needs of clients. In the dynamic and ever-evolving legal landscape of India, Advt. Nidhi Jhawar remains committed to providing exemplary legal services and contributing significantly to the field.

13. **Ms. Prasita Nair** is a highly esteemed professional with a rich educational background and extensive experience in the elder care industry. Holding an MBA in Clinical Administration from Lucknow University, with a specialization in Dementia and Parkinson's care, she demonstrates a deep understanding of clinical operations and specialized care practices. Ms. Nair's remarkable contributions to the elder care industry have earned her recognition as one of North India's Woman Leaders in 2022. Her leadership and dedication to upholding the highest standards of care have been instrumental in driving positive outcomes for the elderly population. With over 18 years of experience as a Registered Nurse, Ms. Nair brings a wealth of expertise to her role as the Head of Clinical Operations at Epoch Elder Care. Her proficiency in clinical administration ensures the delivery of top-notch care services and the implementation of best practices in elder care facilities. Prior to her career in elder care, Ms. Prasita Nair served as an ex-defence Short Service Commissioned Officer in the Indian Army for 5 years. During her tenure, she exhibited exceptional leadership and discipline in demanding environments, honing her skills in decision-making and problem-solving. Ms. Nair's diverse background and unwavering commitment to serving the elderly community make her a valuable asset in the field of elder care, where she continues to make a positive impact on the lives of seniors and their families.

14. **Prof. Dr. Abha Singh** is a distinguished figure in the realm of psychology, renowned for her extensive educational background, prolific publications, and vast professional experience. Holding a PhD in Psychology, with a specialization in Organizational Psychology, she is celebrated for her groundbreaking research on "Personal Effectiveness and Organizational Ethos as Predictors of Organizational Commitment." With over 65 publications to her name, spanning disciplines such as Psychology, Management, Positive Psychology, and Cognitive Psychology, Dr. Singh's research output is characterized by its breadth and depth. Her authored and co-authored books, including 'Organisational Commitment - A Psychological Perspective' (2018), 'Human Values: Psychological Perspective' (2017), and 'Behavioural Science - Achieving Behavioural Excellence for Success' (2012), firmly establish her expertise in psychological perspectives within organizational contexts. Dr. Singh's professional journey, spanning more than 28 years, encompasses teaching, training, research, counselling, and academic administration, with a keen focus on areas such as psychometric testing, behavioural science, and organizational psychology. Notably, she has conducted over 200 Behavioural Skills Training Programs for various organizations and institutions, positively impacting over 13,000 individuals in critical areas such as self-awareness, conflict management, leadership, and stress management. Dr. Singh's multifaceted contributions have significantly enriched the field of psychology, cementing her reputation as a leading authority and mentor in the domain.

15. **Mr. Harish Chawla** stands as the dedicated Secretary General of Hope ek ASHA, serving as the driving force behind the organization's mission to uplift and support Persons with Dementia. With an illustrious leadership tenure spanning 21 years, he has demonstrated unwavering commitment to the NGO and its stakeholders. Mr. Chawla's visionary approach and fervent passion for enacting positive change enable him to navigate the organization through challenges, consistently striving to achieve its goals and make a meaningful impact in the lives of those it serves. His steadfast leadership serves as an inspiration, driving Hope ek ASHA forward in its noble mission.

16. **Mr Saumyajit Roy** Founder & CEO Emoha Elder Care has been playing industry leading roles specifically in the eldercare space for over 15 years. With diverse experience spanning over 24 years across technology, real estate development, alternate assets – education & healthcare growth, and senior care, Saumyajit blends multi-industry knowledge and best of business process design. His passion for elder care and the product design construct of Emoha emerges from his personal experiences of taking care of his parents, in-laws, and years of working with elders across the country.

Cover Page: Abstract Book

National Level
Ageing Perspectives Symposium: Navigating Policies, Wellness,
and Research for a Healthier Tomorrow

March 15-16th, 2024 at IIHMR, Delhi

India is witnessing a demographic shift with a rapidly ageing population, bringing forth a spectrum of challenges and opportunities. Longer life expectancy, evolving family structures, and changing socio-economic dynamics demand a comprehensive understanding of elderly issues. Healthcare, financial planning and legal considerations and awareness for the ageing population have become critical focal points. As a response to these multifaceted challenges, the national level symposium "**Ageing Perspectives Symposium: Navigating Policies, Wellness, and Research for a Healthier Tomorrow**" by the International Institute of Health Management Research (IIHMR) - Delhi in collaboration with the **National Institute of Social Defence, Ministry of Social Justice and Empowerment, Government of India** seeks to unravel the intricacies of ageing. By promoting awareness, knowledge dissemination, and encouraging collaboration, the symposium aims to empower individuals, caregivers, and communities to navigate the unique landscape of geriatric care in India.

The conceptual clarification for the symposium is to provide clarity on the multifaceted landscape of ageing in India. Through a series of expert-led sessions spanning two days, the symposium aims to demystify the complex dynamics of India's ageing population by delving into key themes such as evolving demographics, government initiatives, active ageing principles, the crucial role of NGOs and more. By offering a nuanced exploration of ageing research in India and fostering a deep understanding of professional perspectives, mental health complexities, and optimal health practices for seniors, the symposium seeks to create a cohesive narrative that goes beyond stereotypes associated with ageing. The participants will gain the knowledge and insights necessary to contribute meaningfully to the holistic well-being of the elderly population, transcending age-old perceptions and embracing a proactive and informed approach to the challenges and opportunities presented by an ageing society.

Aim: To provide a comprehensive platform for participants from national level to gain insights into various facets of ageing in India, fostering a holistic understanding of the challenges and opportunities associated with an ageing population.

Objectives:
- Comprehensive Understanding: Equip participants with a comprehensive understanding of the challenges and opportunities associated with India's ageing population, covering demographics, government policies, physical activity, support systems, and research landscape.
- Skill Enhancement: Enhance the skills of professionals and caregivers by providing insights into government policies, mental health complexities, nutrition, and stroke prevention,

empowering them to contribute effectively to the well-being of senior citizens.
- Collaborative Network Building: Facilitate collaboration and networking among participants, fostering a community of individuals, organizations, and researchers dedicated to addressing the needs of the ageing population in India.
- Actionable Strategies: Develop actionable strategies and recommendations based on global insights and expert discussions, enabling participants to implement effective measures for the care, support, and healthy ageing of senior citizens in India.

Who can join?
- Professors and faculty members
- Graduate and post-graduate students
- Family and professional caregivers providing support and care for elderly
- National and regional policymakers shaping healthcare policies
- Government officials responsible for planning, implementing, and managing healthcare programs and services
- Community members interested in learning about and contributing to the well-being of the elderly population

Registration: Free

Registration link: https://forms.office.com/r/keJP43fEfz

[For local participants (Delhi), a daily TA of Rs. 100/- will be provided, while outstation (Outside Delhi) participants will receive Rs. 1,500/- per day upon presentation of tickets or receipts. Boarding and lodging facilities will also be available for outstation participants as needed.]

Expected outcomes: Participants will develop an increased awareness of the specific needs, challenges, and opportunities faced by the senior citizens, fostering greater sensitivity to mental and physical health issues. The workshop will serve as a platform for robust networking and collaboration among professionals, organizations, and community members involved in geriatric care, paving the way for collective efforts to address the evolving landscape of elderly care. Constructive dialogue on policy advocacy will be sparked, encouraging participants to actively contribute to the promotion of age-friendly policies and initiatives in the community. This two-day event is expected to play a crucial role in empowering students, research scholars, caregivers, and communities, leaving a lasting impact on the enhancement of the quality of life for the aging population in India. Additionally, participants will receive certificates for participation and have the opportunity to take part in an e-poster presentation, showcasing their work in front of a diverse audience. Prizes will be awarded for the best three posters as well.

E-Poster Competition
Are you passionate about addressing the challenges and opportunities of ageing populations?
Do you have research or innovative ideas to share on enhancing the lives of senior citizens?
We invite you to present your work at our e-poster presentation session!

Abstract submission: 05.03.2024 [Structured abstract, 250 words]
Acceptance notification: 08.03.2024

Topics:

1) Combating Social Isolation in Older Adults

2) Healthy Ageing

3) Creating Age-Friendly Communities

4) Technology in Improving the Lives of Older Adults

5) Supportive Policies and Programmes for Senior Citizens

6) Financial Security for the Aged

This is an excellent opportunity to exchange insights, network with experts, and contribute to the advancement of ageing-related initiatives.

Organizing Committee:

- Dr Sutapa B Neogi, Director, IIHMRD: Chief Patron
- Dr Preetha G. S., Research Dean & Prof., IIHMRD: Convenor
- Dr Sayani Das, Assistant Professor, IIHMRD: Organizing Secretary
- Dr Vinay Tripathi, Associate Professor, IIHMRD: Organizing Member
- Dr Divya Aggarwal, Associate Dean & Assistant Prof., IIHMRD: Organizing Member
- Dr Sumant Swain, Assistant Professor, IIHMRD: Organizing Member
- Mr Naveen Vashist, Business Head, Emoha Elder Care: Organizing Member
- Dr Dikshant Chauhan, Training Manager, IIHMRD: Organizing Member

Theme 1

Combating Social Isolation in Older Adults

1.1 Addressing Social Isolation Among Elders: Insights and Strategies for Enhanced Social Health and Well-being among elders in Mumbai

Biji R Mohan[1]
[1]Tata Institute of Social Sciences, Mumbai

Background: Among the significant hurdles faced by elderly in India, social isolation is known to adversely affect their physical and mental health, causing feelings of loneliness and depression, in- turn resulting in poor social health. This abstract focuses on the findings from a study to understand the social health of elders in Mumbai. Methods: From October 2022 to September 2023, a qualitative study was conducted in Mumbai metropolitan city of India, among elders aged 60 and above. A total of 110 In-depth interviews were conducted. Data analysis employed ATLAS.ti (Version.23.2.1), using a blend of framework analysis and grounded theory to derive key themes. Results: The study revealed that social isolation among elders was a complex issue requiring collaboration among stakeholders. Insights from seniors emphasized the importance of social health, including interactions with society, family ties, and access to resources. Elders highlighted the significance of maintaining social connections and the impact of societal perceptions and family dynamics on their well-being. Challenges such as health issues and financial constraints were noted. Government support was deemed crucial, with suggestions for personalized assessments and community initiatives. The resilience of elders in facing these challenges highlighted the importance of intergenerational relationships and community support. Conclusions: Findings emphasised the need for comprehensive strategies to combat social isolation effectively, recognizing and addressing the diverse needs and circumstances of the elderly population. Prioritizing social connections, family support, and community engagement was identified to be crucial in battling social isolation and enhancing social health among elders.

Keywords: Social isolation, elders, social health

1.2. Association of Social deprivation with cognitive abilities in older adults in India – Evidence from Longitudinal Aging Study in India (LASI)

Mohit Kumar Pandey[1]
[1]International Institute for Population Sciences (IIPS), Mumbai, India

Background: Existing evidence indicates that the link between socioeconomic status and mental health is complex and overlapping. Although cognitive functioning declines with age and is directly linked to biological brain changes as people age, socioeconomic factors play an essential role in the level and change of cognitive functioning and onset of depression in older adults. This study attempts to assess the association between social deprivation, cognitive status, and depression among older persons in India. Data and Methods: The Longitudinal Aging Study in India (LASI) Wave 1, collected in India between 2017 and 2018, was used for this study. Social deprivation Index (SDI) was constructed. Education, wealth quintile, working status, living arrangements etc. were SDI indicators. Multivariate logistic regressions were used to establish the association between outcome and explanatory variables. Results: The findings reveal that 31% of people with higher social deprivation have poor cognitive health compared to only 8% of people with lower social deprivation. Further, 60.5% of people with higher social deprivation have depressive symptoms compared to 25.8% of people with lower social deprivation. The prevalence of poor cognitive health (18.5%) and depressive symptoms (32.1%) are highest among older adults with no schooling, and further the good cognitive health (0.3%) in older adults with ten or more years of education. The logistic regression analysis indicated that cognitive health and depressive symptoms were significantly associated with age, place of residence, marital status, caste/tribe, and religion. Conclusion: The findings suggest that older adults (75 and above) with depressive and cognitive decline were the largest in the case of highly socially deprived. In other age groups, highly socially deprived people are more vulnerable to poor cognitive health and depressive symptoms. The findings from the study inform the policymakers and planners to devise policies considering equitable healthcare needs to improve mental health among older adults, which is generally ignored in India.

Keywords: Depression; Cognitive health; Social deprivation; Older adults

1.3. Social Isolation, Ageism, and the Double Threat for Older Adults during COVID-19

Shristi Singh[1]
[1]University of Delhi, New Delhi, India

The COVID-19 pandemic significantly impacted social connections, particularly for older adults. This abstract explores the intertwined issues of social isolation and ageism that older adults faced during this critical time. Pre-existing social isolation rates were concerning, and necessary public health measures often exacerbated feelings of loneliness. Furthermore, ageist stereotypes portraying older adults as solely vulnerable fueled social distancing practices. In healthcare, due to ageism the lives of older adults is often seen as having lesser value than others which affects their prioritization during resource allocation and treatment in hospitals. This double threat of social isolation and ageism had a negative impact on the mental and physical well-being of older adults. The abstract highlights the importance of recognizing ageism within pandemic responses and developing strategies to combat social isolation for a more inclusive and supportive environment.

Keywords: Social Isolation, Older Adults, Ageism, COVID-19, Pandemic, Public Health, Age-Friendly Policies, Vulnerability

1.4. Experiences of living arrangement and quality of relationship among the older person in West Bengal

Mr. Kinkar Mandal[1] and Dr. Lekha Subaiya[2]
[1]Assistant Professor, SRM University, Sikkim; [2]Associate Professor, ISEC Bengaluru

Increasing rural to urban migration and urbanization are changes extended family system to the nuclear family in India that impact on living arrangement and quality of relationship for older person. This study focused on understanding living arrangement and its association with quality of relationship among the older person based on primary data. We have taken 25 in-depth interviews among the respondents age 60 years and above both rural and urban areas in North 24 Parganas district of West Bengal, India. The study finds that living alone is mainly due to the conflicting relationships in intergenerational family dynamics. In some cases, by moving between the residences of the sons, older persons maintain the support relationship from the next generation. Further, in some cases, children maintain ties by living in close proximity or in the same bari or neighbourhood as older parents, and by visiting and providing food and clothing when necessary. The household identified by the older person in the study area is physically divided into two, even though some meals are taken together, their living arrangement was separate from one another. Likewise, though the dwelling where the older person staying are same, the sleeping arrangement is separate.

Theme 2

Creating Age-Friendly Communities

2.1. It's Better to impart knowledge to Medical Students on Traffic Rules rather than be late!! : A Quasi experimental study

Prof (Dr) Sanjev Dave[1], Prof (Dr) Anuradha Dave[2], Dr Rashmi Pandey[1]
[1]Autonomous State Government Medical College, Hardoi, Uttar Pradesh; [2]Subharti Medical College, Meerut, Uttar Pradesh

Introduction: Road accidents in India kills almost 1.5lakh people annually which translate on an average into 1130accidents and 422 death every day or 47 accidents and 18 deaths every hour.[1]. Objective of study (1) To assess the knowledge and attitude about road safety regulations among medical students. (2) To estimate the percentage change in their knowledge after educational intervention. Material & Methods: Study area: Subharti Medical College, SVSU in Meerut. Study design: Quasi experimental study, Sampling technique: Purposive sampling, Sample size: Complete Enumeration. Data collection tool: Pre-designed semi structured questionnaire in Google form. Data entry & Analysis: MS excel with appropriate test. Results & Discussion: In both males and female medical students, they were mainly above 18 years (97.3%), 24.8% don't drive, 61.1% drive scooty, 28.9%drive bike and 28.9% drive car. Majority of the participants had a driving license (58.4%), and 70.5% has taken professional training. Among the imperative sign almost all of them knew about meaning of Red/ Yellow/ Green Light. Least knowledge was for the sign Turn Left and go ahead (32.6% Vs 80.7%); followed by Give way (32.6% Vs 92% after intervention). Among the warning sign most known sign was parking both sides (89.2%) and least known was barrier ahead sign (50%) pre intervention [<0.05]. Similarly attitude for road safety was assessed for using helmet (37% vs 92.7%); taking wrong lane (30% vs 4.7%), use mobile phone while driving (45.9% vs 87.3%) which showed significant change in the attitude (p<0.05). Conclusion: This study provided an opportunity to assess and educate the students in order to decrease the knowledge–practice gap and persuade them toward following road safety measures. It suggests that proper awareness about road safety regulations among the community may help significantly in reduction of road traffic-accidents incidents in India.

Keywords: Road traffic Accidents, Traffic Rules, Quasi Experimental study, Medical students

2.3. "The Greying Gays (Queer)": Understanding the Dual Burden of Age and Gender

Krishna Karubakshi[1]
[1]International Institute for Population Sciences, Mumbai

Background: With the background of improvements in public health, medicine, and health technology, people across the world are living into their sixties and beyond. While living longer is a boon, the widespread existence of ageist attitudes that seep into every aspect of their lives makes the long lives of the elderly a matter of torment. The prejudicial attitudes, discriminatory acts, and stereotypical beliefs ageism holds have serious and wide-ranging consequences on the health and well-being of the elderly. It further intersects with other forms of bias and disadvantage including those related to sex, gender, race, and disability, exacerbating the negative impact. One such often overlooked intersection of identities is that of age and gender - the elderly gender minority (referred to as Elderly Gay/Queer Individuals), the ones who face the dual burden of stigmatization, exclusion, and discrimination, furthering their experiences of exclusion, abject poverty, illiteracy, poor health, and derision. Objective: In support of the UN Decade of Healthy Ageing (2021–2030), this study aims to provide an insight into the experiences of elderly queer individuals concerning their physical, mental, and social well-being, their unmet needs for social justice and care and to deliver suggestions and strategies to tackle the intersectional issue of ageism & homophobia for an inclusive world. Methodology: This study has attempted to analyze the same, through a systematic review of the limited studies available in this field, using the literature review-based study approach. Results and Conclusion: The study findings suggest a systematic invisibility of elderly queer individuals in society due to the double burden of greying and homophobia, which needs to be tackled through effective strategies.

Keywords: Elderly Queer, Dual Burden, Ageism, Homophobia, Intersectionality, Well-being

2.3. Prevalence Of Myths and Misconceptions About Ageing Amongst Indian Young Adults

Hargun Kaur Anand[1]
[1]University of Delhi, New Delhi, India

The prevalence of negative attitudes and beliefs about ageing can be detrimental to the well-being of the elderly. It is imperative to understand the extent to which misconceptions are prevalent amongst the population in order to develop sensitisation and awareness programs that can be tailored to address specific misconceptions, fostering a more accurate understanding of the ageing process. Thus, the present study aimed at understanding the prevalence of age-related myths and awareness about ageing amongst young adults. A sample of 18 to 25 year olds residing in India was surveyed using the Palmore's Facts on Aging Quiz (FAQ). The findings of the study has implications for the critical role that young adults' perceptions play in the overall well-being of older adults. Addressing the prevalent misconceptions can foster better intergenerational relationships, thereby combating social isolation among older adults.

Keywords: Ageism, Ageing Myths, Misconceptions, Awareness, Older Adults

2.4. Factors affecting intergenerational communication between young adults and older adults

Babita Bisht[1]
[1]University of Delhi, New Delhi, India

The research examines young adults' perception of the intergenerational communicative behavior between young adults and older adults (65 years and above) in India. The study recruited 100 master's students between the age of 22-24 years as participants. Multiple factors at the societal and individual levels were identified in the study. Communicative behavior- i.e. respect or avoidance is influenced by age norms and age stereotypes at the societal level. Similarly, at the individual level, frequency, and type of contact with older adults, and young adults aging anxiety affects their communicative behavior and communication satisfaction. A cross-sectional study design was adopted and the quantitative data analysis through SPSS was done. The research has implications at the community level, creating a society wherein intergenerational contact is promoted and nurtured. The positive and value-laden experience of interaction between the two generations helps in creating an inclusive, age-friendly society that appreciates the differences.

Keywords: Intergenerational communication, age stereotypes, age norms, aging anxiety

Theme 3

Healthy Ageing

3.1. Association between Lifestyle behaviors and self-reported mood disorders with "sad, blue or depressed" days (SBDD) among older adults in India

Ravina Ranjan[1] and Dr Jeetendra Yadav[1]
[1]Jawaharlal Nehru University (JNU), Delhi, India

Background: Depression's impact on disease burden has been substantial, ranking as the leading cause of burden of disease between 2000 and 2002, and projected to reach second place in the DALYs (disability-adjusted life years) ranking worldwide by 2020 and first place by 2030. Aim: The present study aims to examine the Association between Lifestyle behaviors and self-reported mood disorders with "sad, blue, or depressed" days (SBDD) among older adults in India. Method: The present study utilized Longitudinal Aging Study India (LASI) (Wave 1; 2017-18). Descriptive statistics, bivariate (chi-square tests of association), and multivariate (relative risk), models were performed. Results: One in every five (19.7%) persons felt sad, blue, or depressed for two weeks during the last 12 months. Individuals with primary education are 12.3% less likely (RR =0.877) to report these feelings than those without education. Still, individuals with graduate and above education are 28.3% less likely (RR = 0.717) to report these feelings than those with primary education. Conclusions: Though many older adults in India struggle with prolonged sadness or depression, hope remains. Age, marital status, religion, region, and lifestyle choices like alcohol consumption all play a role in the duration of these negative emotions. The LASI 2017-2018 data paints a complex picture, highlighting challenges but also charting a path towards a future where emotional well-being is a fundamental right, especially for later life. Collaborative efforts and innovative strategies focused on understanding these unique factors can help older adults not just survive, but thrive, with their emotional landscapes painted in vibrant hues of joy and well-being.

Keywords: LASI, OOPE, Epidemiology, late-life depression, and financial burden

3.2. Sarcopenia and its impact on Quality of Life: A Review

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Sarcopenia is characterized by the progressive loss of muscle mass and function with age, that significantly impacts the quality of life (QoL) and independence of the older adults. This review aims to provide a comprehensive overview of the impact of sarcopenia on the QoL of the older adults, focusing on the physical, psychological, and social aspects of life. Sarcopenia significantly affects physical QoL by reducing muscle strength and endurance, leading to difficulties in performing daily tasks and activities. This decline in physical function can result in increased dependency, reduced mobility, and a higher risk of falls and fractures. Psychological QoL is also affected, as sarcopenia can lead to feelings of frustration, depression, and anxiety due to limitations in physical abilities and changes in body image. Social QoL may suffer as well, as individuals with sarcopenia may experience social isolation, decreased participation in social activities, and a loss of independence. All these factors ultimately impact the overall QoL of the older adults. Moreover, the health adversities that come with sarcopenia poses significant public health challenges as it is associated with increased healthcare costs, hospitalizations, and a higher burden on the healthcare system. Therefore, more research in sarcopenia will enable healthy ageing of the growing ageing population, which is necessary for maintaining a good QoL allowing them to stay active, engaged and independent. It will also lead to reduced healthcare costs, family and community well-being, maintaining mental and physical health, thus promoting longevity.

3.3. Importance of Machine Learning Technique to Predict Disease Patterns and Risk Factors in Aging Populations

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As per the World Health Organization, healthy aging is nothing but a progression of maintaining functional capability to enable well-being in older age. In today's society, maintaining good health as you age has become increasingly essential. Advanced technology like machine learning has played a crucial role in enhancing healthcare services for the aging population, leading to improved facilities and treatments.

Healthy aging can be ensured by employing machine learning algorithms to promote well-being, prevent age-related diseases, and optimize healthcare delivery for older adults. Machine learning algorithms, encompassing both supervised and unsupervised learning techniques, offer valuable tools for promoting healthy aging. The supervised machine learning algorithms such as random forest, decision trees, and logistic regression support vector machines can predict age-related health outcomes, disease risks, and functional decline based on various factors like medical history, lifestyle choices, and demographic information. By analyzing these factors, these algorithms enable personalized interventions and early identification of health issues, facilitating proactive healthcare management.

On the other hand, unsupervised learning algorithms like dimensionality reduction and clustering techniques such as principal component analysis (PCA), and KNN can identify hidden patterns and subgroups within aging populations. This helps in tailoring interventions, optimizing healthcare resources, and improving overall well-being for older adults, contributing to healthy aging initiatives.

Overall, machine learning enables proactive and personalized approaches to healthy aging, ultimately improving outcomes and quality of life for older populations.

Keywords: Machine Learning, Healthy Aging, Healthcare, Supervised Machine Learning, Technology

3.4. Defining status of Healthy Aging among Jains of Delhi, India- A cross sectional study

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Background: No clear definitions of healthy aging exist in the literature. The concept is very debatable and subjective. The present paper used an operationalized definition developed by assessing the perspective of participants. The paper aims to estimate the status of healthy aging in the Jain population of Delhi and the development of healthy aging definition for India to foster cross-national research on healthy aging. Methods: This is a cross-sectional study involving 403 participants aged 60 years or older from the Jain population of Delhi including males and females. N-vivo software has been used to identify the themes about older individuals' perceptions of healthy aging. Multiple linear and logistic regression models have been used to examine the validity of the operationalized definition used for estimating the status of healthy aging in the present population. Results: The status of healthy aging varied as per operationalized definitions. Optimism and being able to do what they want to do and perform activities of daily living without dependency and satisfaction from their life were the main themes identified from the thematic analysis. Conclusion: The present study supports the Baltes and Baltes model of healthy aging we recommend to use of subjective and objective approaches to define healthy aging in India by incorporating physical, psychological, social, and functional health.

Keywords: Heathy aging, older adults, models, operationalized definitions

3.5. Are musculoskeletal disorders hastening ageing in elderly women and is physical exercise a solution?: Across-sectional study

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Introduction: Musculoskeletal (MSK) disorders are frequent in postmenopausal and elderly women, which considerably reduces quality of life and limits productivity. MSK disorders ranging from discomfort to irreparable and debilitating damage involving muscles, tendons, bones, cartilage and ligaments. Females have a 47·4% (44·9-49·4) greater global age-standardised prevalence of various musculoskeletal illnesses compared to males. The prevalence rose with age, peaking at 65-69 years for both sexes. It is critical that communities come together and take effective measures for healthier ageing of female population. Physical activities may slow down ageing by 10 years. The purpose of the study is to identify the determinants affecting the HrQOL in elderly females . Methodology: Data collection in this cross-sectional study will be done from elderly women aged ≥ 50 with chronic musculoskeletal disorder. Independent variable will be physical and include e age, sex, body mass index (BMI), pain severity score, number and most painful sites. The dependent variables QOL (comprising the index scores and musculoskeletal Health Questionnaire (MSK HQ) is used to access patient's current musculoskeletal health and allow monitoring their progress over time. Microsoft Excel will be used for data analysis. Discussion: Pain and stiffness are commonly seen in all musculoskeletal disorders which are debilitating and reducing the quality of life of females exponentially. Early rise in these symptoms and measures to slow these down are needed to further maintain quality of life. and could help in improving quality of life in elderly women with musculoskeletal disorders.

Keywords: musculoskeletal disorders, elderly women, physical activity, ageing

3.6. Household Air Pollution from Cooking Fuels and Cognitive Decline in Older Adults: Evidence from Longitudinal Aging Study in India (2017–2019)

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Introduction: Exposure to high levels of air pollution is associated with poor health, including worse cognitive function. Whereas many studies of cognition have assessed outdoor air pollution, we evaluate how exposure to air pollution from combustion of polluting household fuels relates with cognitive function using harmonized data from India. Materials & methods: We analyze adults age 50+ in three nationally representative studies of aging with common data collection methods: the 2017–2019 Longitudinal Aging Study in India (n = 50,532). Use of polluting fuels was assessed by self-report of wood, coal, kerosene, crop residue, or dung for cooking. Cognitive function was measured by performance across several cognitive domains and summarized into a total cognition score. We used linear regression, by country, to test how polluting cooking fuel use relates with cognition adjusting for key demographic and socioeconomic factors. Results: Approximately 47% of respondents in India relied primarily on polluting cooking fuel, which was more common in rural areas. Using polluting cooking fuels was consistently associated with poorer cognitive function in all countries, independent of demographic and socioeconomic characteristics. Adjusted differences in cognitive function between individuals using polluting and clean cooking fuel were equivalent to differences observed between individuals who were 6 years of age apart in India. Across countries, associations between polluting cooking fuel use and poorer cognition were larger for women. Conclusions: Results suggest that household air pollution from the use of polluting cooking fuel may play an important role in shaping cognitive outcomes of older adults in countries where reliance on polluting fuels for domestic energy needs still prevails. As India continue to age, public health efforts should seek to reduce reliance on these fuels.

Keywords: LASI, Cognitive Health, Cooking Fuel, Aging

3.7. Societal aging and Wellness

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In 2050, 80% of older people will be living in low and middle- income countries. The pace of population aging is much faster than in the past (WHO). The National Institute on Aging defines, "ageing is associated with changes in dynamic biological, physiological, environmental, psychological behavioural and social processes". Societal aging can affect economic growth, patterns of work and retirement, the way that families function, the ability of governments and communities to provide adequate resources for older adults and prevalence of chronic diseases and disability (www.nia.nih.gov). This paper will deal with all aspects of well- being that affects societal ageing. The objective is to find how various forms of well-being are interlinked with societal ageing.

Keywords: Well-being, Aging, Societal ageing

Theme 4

Supportive Policies and

Programmes for Senior Citizens

4.1. Beggary and Old-Age: An Exploratory Study into Senior Citizens' Dignified Survival

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Ageing is a natural process in human beings wherein the individual gradually loses vigour, strength, and vitality with increasing age over their lifetime. Despite the fact that nobody is an exception for this process, the lack of infrastructure and empathy for a sizeable population of the society is startling. Ageing populations need special care and assistance, owing to their reduced ability to support themselves; physically, financially, and mentally. While old age comes with health issues, dependence on others and decline, it certainly doesn't make a person "less worthy" to live. The rationale of the study is to focus on senior citizens that are pushed towards beggary and suffering, thus exposed to elements like unsanitary conditions, diseases or worse, violence and abuse. The objectives of the study are to explore the gaps in administration, trying to find reasons as to why in spite of so many policies and safety nets, such situations prevail. Other objectives include such individuals' experiences and challenges, followed by the role of non- governmental organizations/ youth in making a difference. The study follows a mixed-methods approach, borrowing from the experiences of the elderly while also referring to surveys and data published by the governmental sources. The study also tries to delve in the issue of "Identity-less" senior citizens, that do not possess any documents, hence dependent entirely on beggary to survive. Understanding the stories of these suffering individuals, coming from torn and unsupportive families and tragic backgrounds is the focus of this study.

Keywords: Ageing, Beggary, Policy, Health, Non-governmental Organizations, Youth

Theme 5

Technology in Improving the

Lives of Older Adults

5.1. Role and impact of technology in enhancing life of older adults.

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Purpose: As the global population ages there is a growing need to address the challenges faced by elderly adults in their daily routine hence with implementation and utilization of technology to these problems will help us to promote safe and healthier lifestyle and enabling great health in terms of physical, mental and social well-being. Method: Various problems which are commonly seen and associated with older adults with advancing age are as follows with their solutions: 1) Frequent Falls and risk of sudden Heart Attack – we will elaborate I-Card with an alarm system and SOS button which will connect with nearby house members/ambulance, 2) Social isolation and family ignorance by family members of elderly which may lead to depression - We will elaborate more on one click hologram technology which will connect them with their loved ones and other family members with ease and provide real time interaction, 3) Healthy aging-Wearable devices to monitor regular basic parameters along with SOS buttons to call nearby help. 4) Financial security and Policies-Coverage of medical service should be mandatory under Ayushmann Bharat for elderly aged population. Result: All the technologies mentioned above will act as an aid to improve the quality of life of elderly population. Conclusion: Although aging is an irreversible process but with the help of technology it can become happier and peacefully livable.

Keywords: Challenges faced by elderly, Implementation and utilization of technology, Emergency alert system, Hologram technology, Aid to improve quality of life of elderly.

5.2. Can technological interventions improve the cognition in older adults with MCI in India?

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Background: Cognitive training and rehabilitation using computing technology have provided promising evidence in support of improved cognitive function among participants with MCI. Therefore, this review aims to examine technological interventions conducted globally to improve cognitive function among older adults with MCI. Method: An inclusion-exclusion criterion was designed, and four databases: Pubmed, Embase, PsycoINFO (EBSCOhost), and CINAHL (EBSCOhost) were searched for empirical studies (RCTs and quasi-experimental studies) among human participants. A combination of keywords for the main concepts (MCI, technology, training, and rehabilitation) was used. Based on strategy and inclusion-exclusion criteria, a total of 12 articles were selected for review. Results: A variety of technological interventions, namely, computerized cognitive training (CTT), virtual reality, and robot-assisted interventions, have significantly improved cognitive function among older adults with MCI. Virtual reality-based groups showed improvement in global cognition, verbal memory, executive function, and IADL (instrumental activities of daily life) after the intervention, whereas game-based neurofeedback training (NFT) showed considerable improvement in sustained attention and spatial working memory (SWM). Conclusion: Overall, computerized cognitive rehabilitation programs are promising interventions to improve specific cognitive functions and subdomains of cognition with moderate to large-scale effects. Considering the limitations faced by the Indian elderly in accessing technology, more comprehensive trials are needed in India to establish strong evidence in support of technological interventions.

Keywords: cognitive impairment, elderly, computerized training, RCTs

5.3. The Impact of Virtual Reality on the Well-being of Older Adults: A Case Study of UT Chandigarh, India

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Virtual reality (VR) is a technology that can provide immersive and engaging experiences for users. However, its impact on the well-being of older adults, especially in developing countries, is not well understood. This study aimed to explore the impact of VR on the well-being of older adults living in elderly homes in Chandigarh, India. The objectives were to: (1) assess the level of interest and acceptance of VR among older adults; (2) measure the effects of VR on the physical, mental, and social aspects of well-being; and (3) identify the challenges and opportunities of implementing VR in elderly homes. The methodology involved a mixed-methods approach, consisting of a survey, a pre-test and post-test, and semi-structured interviews. The survey was administered to 100 older adults randomly selected from the five elderly homes to measure their interest and acceptance of VR. The pre-test and post-test were conducted with 50 older adults who participated in a four-week VR intervention, where they used VR headsets to experience various content such as travel, education, entertainment, and social interaction. The pre-test and post-test measured the changes in their mood, cognition, mobility, and social interaction using standardized scales. The semi-structured interviews were conducted with 20 older adults and 10 staff members from the five elderly homes to explore their experiences, perceptions, and feedback on the VR intervention. The data analysis involved descriptive and inferential statistics, as well as thematic analysis. The data were visualized using bar graphs and pie charts in Excel. The observations and results showed that: (a) older adults had a high level of interest and acceptance of VR, especially for entertainment and education purposes; (b) VR had a positive impact on the well-being of older adults, as it improved their mood, cognition, mobility, and social interaction significantly from the pre-test to the post-test; (c) the main challenges of VR were related to the cost, availability, and usability of the devices, while the main opportunities were related to the customization, diversity, and accessibility of the content. Therefore, it was concluded that VR is a promising technology that can improve the lives of older adults in Chandigarh, but it requires further research and development to overcome the existing barriers and maximize the potential benefits. The study also suggested some solutions to arrange VR in elderly homes, such as seeking funding from government or private sources, partnering with VR vendors or developers, and providing training and support for staff and older adults.

Keywords: Virtual reality, Well-being, Older adults, Chandigarh, Elderly homes