

The Impacts of Kerala's Aging Population: Special Focus on the Marginalized Sections of Society

Ajai Kumar. A,

Asst. Professor of Economics, B. J. M. Govt. College, Chavara, Kollam, Kerala, India
ajaiadoor@gmail.com

How to cite this article: Ajai Kumar. A. (2024) The Impacts of Kerala's Aging Population: Special Focus on the Marginalized Sections of Society. *Library Progress International*, 44(2), 1165-1170.

Abstract

Kerala has the highest percentage of elderly population in India. One of the major challenges faced by the elderly population is the lack of social support as age advances. As the elderly population is not a homogeneous group, it is crucial to understand the demographic aging in Kerala, and the factors influencing their health, disability, living arrangements, and economic independence, to form a strategy to address the problems they face. The most vulnerable group of the aging population is the elderly persons from the marginalized sections of the society. This paper aims to examine the implications of an aging population on these marginalized communities in Kerala, identify specific challenges they face, and suggest potential strategies for addressing their needs

Key words: Old Age Dependency Ratio (OADR), Vayojana Nayam, Old Age Pension Scheme, Sayamprabha Homes, Pakalveedu, Vayomithram, Navajeevan

Introduction

The global population is expected to reach 8.5 billion in 2030 and 9.7 billion in 2050 as per World Population Prospects 2022 by the United Nations. The number and proportion of the elderly population are increasing at a fast pace globally and in Kerala. Aging of the population is defined in terms of the proportion of persons aged 60 years and above in the total population. As per WHO, the number of people aged 60 years and above in the world will increase to 1.4 billion in 2030 and it is expected to become 2.1 billion by 2050. This phenomenon of population aging has become a concern among policymakers all over the world. Population aging will be one of the most important social phenomena of the coming decades. This issue is important because when the proportionate increase in the aged population results in an increase in Old Age Dependency Ratio (OADR). The OADR is defined as the number of persons aged 65 years and over per 100 persons of working age (20 to 64 years) and is the most commonly used indicator for monitoring changes in the age structure of the population (OECD).

The percentage of the elderly population in India has been increasing at an increasing rate and the trend is likely to continue in the coming years. The aging population of Kerala has also been increasing in recent decades. According to Census 2011, the percentage of the population in the age group 60 years and above to the total population was 12.6 for Kerala as against the national average of 8.6 percent. The Old Age Dependency ratio was 19.6 percent for Kerala and 14.2 percent for India. The Elderly in India Report, 2021 highlights that the high growth rate in the elderly population is spectacular compared to the general population rise. The figures show that Kerala ranks top in the proportion of elderly people (16.5 percent) to the total population and is projected to reach 20.9 percent in 2031. The annual growth rate of the elderly population is projected to be 3.96 percent for Kerala. The number of elderly females in India is projected to exceed males in 2031. Out of the projected total population of 194 million in 2031, 101 million will be female and 93 million will be males (Kerala Economic Review 2023).

Objective of the Study

This study aims to investigate the different interrelated problems experienced by the elderly population in Kerala, particularly in marginalized groups, from multiple perspectives—economic difficulties, availability of healthcare, social loneliness, societal views on aging, support systems from the government, and the contribution

of NGOs—ultimately underscoring the pressing necessity for holistic approaches that guarantee respect and wellness for this at-risk demographic.

Review of Literature

Kerala is experiencing rapid population aging, leading to it being classified as an aging society. In the Article “Aging in Kerala: One more population problem?” Irudaya Rajan pointed out that the high percentage of elderly individuals in Kerala may be attributed to significant out-migration from the state. The demographic shift in Kerala is outpacing the rest of the country due to factors such as increased life expectancy, reduced fertility and mortality rates, delayed marriage age, and high female literacy. However, this trend presents extensive and intricate health, social, and economic challenges. Various efforts have been made in Kerala to tackle this issue, including the implementation of the first Senior Citizen Policy in India. Nevertheless, the infrastructure and planned facilities must adapt to the changes brought about by this demographic transition to effectively meet the needs of the aging population.

The article "Quality of Life and Sociodemographic Factors Associated with Poor," authored by Rajasi, Mathew, and others, indicates that a significant proportion of older women experienced low quality of life, particularly those living in rural areas. Various factors such as financial assistance, family support, and education play a role in determining the well-being of the elderly. Improving the quality of life for elderly women is achievable through measures such as providing financial stability, ensuring proper care, and strengthening their social connections.

The article "Ageing and Elderly Care in Kerala" authored by S. Irudaya Rajan, Aneeta Shajan, S. Sunitha, provides an overview of the elderly population in Kerala and discusses various aspects of elderly care and issues. This is based on data from the Kerala Ageing Survey (KAS) 2013, which was conducted by the Centre for Development Studies (CDS) in Thiruvananthapuram, Kerala. The article delves into the primary concerns, policies, and initiatives related to aging and elderly care practices in Kerala, and also examines the fundamental care responses at three different levels: household, institutional, and societal. Kerala's aging process is experiencing a rise in the proportion of elderly individuals, accompanied by significant transformations in families and communities. Consequently, various systems need to be restructured to meet the needs of the aging population in society. The challenges and concerns associated with the aging population necessitate sustained attention and proactive planning, with policies tailored to cultural and social contexts. Elderly care should encompass a comprehensive approach involving healthcare, socio-economic support, and the creation of an appropriate environment to enhance the overall quality of life.

In 1976, S. Cobb provided a comprehensive definition of social support, categorizing it into four types: emotional support, instrumental support, informational support, and appraisal support. These types of support are essential for all age groups, but the needs of the elderly are often overlooked, with more focus placed on nutrition and healthcare. According to a 2015 survey by the Age Well Foundation in India, elderly individuals commonly face challenges such as a lack of meaningful engagement opportunities, declining health, lack of respect in family and society, loneliness, psychological issues, financial problems, legal issues, and interpersonal problems. Studies in India indicate that around 32% of the elderly have experienced at least one form of abuse, with as many as 28% experiencing multiple instances of abuse, including economic, physical, psychological, and sexual abuse (State Planning Board Report 2022).

In Kerala's elderly community, the percentage of women is 20% higher than the national average. This gender gap in mortality patterns results in women often becoming widows in their early 50s, impacting various aspects of their lives such as financial security, social interactions, and healthcare access. The increased incidence of widowhood is attributed to the age gap between spouses and differences in life expectancy between men and women. Social norms also play a role, as women are typically expected to be caregivers, leaving many elderly widows vulnerable. Their dependency increases due to factors like health, relationships with adult children and caretakers, societal norms, and government policies. This "feminization of age" highlights the need for gender-sensitive policies for the elderly in the state. While mainstream elderly individuals face multiple issues, these challenges have a more significant impact on marginalized communities, reflecting varying degrees of vulnerability and presenting specific challenges (State Planning Board Report 2022).

The psychological well-being of elderly individuals is significantly impacted by aging, which is also influenced by their living situation and circumstances. Social norms and stereotypes play a major role in shaping their sense of well-being and active aging. Studies show that elderly individuals living with their spouses tend to experience better psychological well-being compared to those who are widowed or unmarried. Societal norms related to aging and gender continue to pose challenges in promoting a positive perspective on healthy aging within the community (State Planning Board Report 2022).

Social isolation poses a serious challenge for many elderly individuals, particularly those who live alone or in institutional settings. Factors such as retirement, the loss of a loved one, and illness can contribute to feelings of loneliness and a breakdown in communication. The lack of social interaction can lead to significant mental and physical health problems, including depression, anxiety, and other ailments. Additionally, some seniors face financial difficulties such as insufficient retirement savings, high medical expenses, and reduced income upon leaving the workforce. Financial instability can prevent them from accessing essential resources such as food, housing, and healthcare, thereby increasing their vulnerability. The widening economic disparity among older adults is another aspect of this issue (Sonia, Asma Bibi, Anila Iram, 2024).

In the healthcare sector, ageism may result in older adults receiving less aggressive treatment for their health issues or being excluded from medical interventions because of assumptions about their life expectancy and quality of life. The care received by older adults is often of lower quality or their needs are often given less priority compared to younger individuals, which shows a lack of respect (Sonia, Asma Bibi, Anila Iram, 2024).

Challenges Faced by the Elderly Population in Marginalized Communities

Economic Challenges:

The economic difficulties faced by elderly individuals in marginalized communities in Kerala are complex and deeply ingrained in long-standing issues of poverty and inequality. Older adults, particularly those from tribal backgrounds or economically disadvantaged groups, often do not have enough financial resources to meet their basic needs. The lack of pensions or social security benefits worsens their vulnerability, leading many seniors to depend on informal work or the assistance of struggling family members. This unstable financial situation restricts their access to essential services, such as healthcare and nutrition. Furthermore, the economic marginalization of these communities is worsened by a lack of education and awareness about government programs meant to help the elderly (Abdul Sherif, 2021).

Many seniors are uninformed about their rights due to insufficient efforts by authorities to reach out to them. As a result, this lack of knowledge prevents them from benefiting from programs that could ease some of their financial burdens. Alongside direct economic challenges, older adults encounter significant obstacles in obtaining loans due to age-related prejudices and a lack of collateral. The transfer of wealth between generations has also been disrupted as younger family members move away in search of better opportunities. This migration weakens the traditional support systems that once provided financial stability for elderly relatives (Thampi, 2024).

Consequently, many elderly individuals find themselves not only socially isolated but also financially dependent on limited community resources. Ultimately, addressing these economic challenges involves targeted interventions that acknowledge the unique circumstances experienced by marginalized elderly populations in Kerala. Policymakers must prioritize inclusive strategies that improve financial literacy among seniors and ensure access to social protection programs tailored specifically for this demographic. By creating an environment where older adults can achieve greater financial independence and stability, society can better uphold their dignity and quality of life amid ongoing socio-economic adversities (Thampi, 2024).

Healthcare Access and Quality for Seniors:

Elderly individuals in marginalized communities in Kerala encounter significant obstacles when it comes to accessing healthcare and receiving high-quality services. Despite Kerala's overall advancements in health indicators, there are still noticeable inequalities, especially for older people from economically disadvantaged or tribal backgrounds. Many seniors face challenges such as limited healthcare facility access, inadequate transportation options, and financial constraints that impede their ability to afford necessary treatments, resulting in untreated health issues (Abdul Sherif, 2021).

Moreover, the healthcare services accessible to these seniors often fail to meet their requirements due to systemic problems within the public health system. Facilities may lack essential medical supplies and staff trained in geriatric care, leading to long wait times and a lack of tailored outreach programs for older adults. Consequently, many seniors resort to traditional healing methods or delay seeking care, contributing to higher morbidity and mortality rates in this demographic. Cultural attitudes toward aging also influence how older adults access and utilize healthcare (Thampi, 2024).

Some seniors encounter stigma when seeking assistance for physical or mental health issues, which can deter them from seeking necessary treatments. Additionally, caregivers may prioritize the needs of younger family members over older relatives due to societal norms that undervalue elder care. Addressing these complex challenges necessitates collaborative efforts from government entities and NGOs. Initiatives focused on raising awareness about available services can empower seniors to advocate for their health needs and promote

community-based programs that enhance access to quality healthcare tailored for this vulnerable population. By prioritizing equitable healthcare access and enhancing service quality for marginalized elderly individuals in Kerala, society can significantly improve their overall well-being and dignity in their later years (Mathew, 2021).

Social Isolation Among Elderly Populations:

The issue of social isolation among elderly people in marginalized communities in Kerala has a significant impact on their quality of life. Due to urban migration and changing societal norms, many older adults in these areas are experiencing increased isolation as traditional family structures break down. This is especially noticeable among tribal populations and those living in economically disadvantaged areas, where social networks are often fragile or completely absent (Abdul Sherif, 2021).

The absence of familial support not only worsens feelings of loneliness but also means that seniors do not receive the emotional and practical help they need. The effects of social isolation go beyond just companionship and have serious implications for mental and physical health. Research indicates that individuals who are socially isolated are at a higher risk for depression, anxiety, and cognitive decline. In the context of Kerala's marginalized elderly population, this isolation can create a harmful cycle where declining mental health further separates individuals from potential social interactions, making them feel even more lonely (Thampi, 2024).

Additionally, cultural attitudes towards aging play a role in this issue. In many instances, older adults face stigmatization and neglect as younger generations prioritize their careers over family responsibilities. This not only marginalizes the elderly but also reinforces negative stereotypes about aging that can discourage community involvement. The lack of proactive measures to encourage connections between generations further worsens this problem. Dealing with social isolation requires comprehensive strategies that encourage inclusivity and community participation. Initiatives such as senior-focused community centers can act as important hubs for interaction and support (Abdul Sherif, 2021).

Government Initiatives in Kerala for Elder Care

There are many diverse measures implemented by the Government of Kerala to address the problems of the aging population in the State. Interventions of the Government of Kerala Vayojana Nayam 2013 (The Old Age Policy) of the Government of Kerala acts as a guideline to prepare an Action Plan to frame schemes and projects for the welfare of all citizens above the age of 60, especially elderly women. The policy aims to provide a better social, economic, and healthy life to the senior citizens of the State

Old Age Pension Scheme

This is a non-contributory pension scheme for citizens aged 60 years and above, of the BPL category. The beneficiaries of social security pensions receive a monthly pension of Rs 1,600, of which the greater share is met by the State Government. The Central share contribution is Rs 200 per month for persons aged 60-79 years and Rs 500 for 80 years and above. The remaining amount is met by the State Government. As on November 2023, there are 26.44 lakh beneficiaries eligible for old age pension. The beneficiaries of old age pension, LSGI-wise, are given below

Old Age Pension Beneficiary of Kerala LSGI-wise

Table No. 1

Old Age Pension	Number of Beneficiaries in Lakh
Grama Panchayat	21.30
Municipality	3.27
Corporation	1.87

Source: Kerala Economic Review 2023

Institution for Eldercare

In Kerala, the Social Justice Department oversees the operation of Sixteen Government old age homes. Additionally, there are approximately 623 registered old-age homes under the Orphanage Control Board. To provide Daycare facilities to the elderly, the department collaborates with Local Governments to operate Pakalveedu (Day Homes), and later on, these were upgraded to Sayamprabha Homes incorporating, recreation, health care, and nutritional supply for the elderly. During 2022-23 an amount of Rs. 53,62,007 has been expended for 54 Day Care Centres.

Number of persons in Old Age Homes in Kerala, 2016-17 to 2022-23

Table No. 2

Year	No. of Inmates
2016-17	19149
2017-18	27272
2018-19	28029
2019-20	28021
2020-21	28788
2021-22	30105
2022-23	25945

Source: Kerala Economic Review 2023

Furthermore, the Department has introduced 'Model Sayamprabha Homes' in Thiruvananthapuram and Kozhikode districts as Multi-Service Day Care Centres to address various old age needs. The "Second Innings Project" is designed to enhance the quality of life for senior citizens residing in Government old age homes by providing basic amenities such as shelter, food, medical care, and entertainment opportunities. In 2022-23, Rs 48,29,737 has been allocated for this scheme.

Kerala has the highest percentage of the elderly population in the country, and one of the major challenges they face is the lack of social support as age advances. Understanding demographic aging and factors influencing their health, disability, living arrangements, and economic independence is crucial to form a strategy to address these problems. The State Government, including the Social Justice Department and Kerala Social Security Mission, implements social security and protection schemes for the elderly population. Local governments, elderly self-help groups, NGOs, and charitable organizations also play a significant role in elderly care. Kudumbashree plays a pivotal role in elderly inclusion, destitute rehabilitation, and palliative care (KER, 2023)

Programs under the Sayamprabha scheme include multi-service day care centers, food kits, emergency first aid, Ayurveda treatment, psycho-social care, glucometers, Vayosevana Award, music therapy, yoga therapy, Vayomithram, and Navajeevan. These schemes aim to create an old age-friendly environment, provide health care and support, and help senior citizens start self-employment units. The government also recognizes the importance of care for the elderly and recognizes the contributions of government and non-government organizations in the field of elder care (KER, 2023)

Role of NGOs in Elderly Care:

NGOs are crucial in addressing the various challenges faced by the elderly in marginalized communities of Kerala, serving as intermediaries between government initiatives and local needs. They play a vital role in filling critical gaps in service delivery, particularly in healthcare access, social support, and economic empowerment. Many older adults in these communities lack awareness of existing government programs and face barriers to accessing them, so NGOs provide essential outreach services to educate seniors about their rights and available resources (Mathew, 2021).

NGOs have the ability to mobilize community resources to create tailored programs that cater specifically to the needs of elderly individuals. For example, they often organize health camps that provide free medical check-ups, screenings for chronic conditions prevalent among seniors, and mental health support services. These initiatives are crucial in improving healthcare access for marginalized elders who may otherwise be unable to afford or reach medical facilities (Thampi, 2024).

Additionally, NGOs advocate for policy changes by representing the interests of these vulnerable populations at local and state levels. In addition to healthcare interventions, NGOs address social isolation among older adults by facilitating community engagement activities. They organize events that promote intergenerational interaction and foster a sense of belonging among seniors through various cultural programs or skill-sharing workshops. These initiatives combat loneliness and empower older individuals by recognizing their contributions to society (Abdul Sherif, 2021). Furthermore, NGOs focus on capacity-building efforts within marginalized communities, providing training on financial literacy or vocational skills tailored for older adults. This enables the elderly to achieve greater economic independence and helps mitigate some of the economic challenges they face while promoting dignity and self-sufficiency. In conclusion, the role of NGOs in elderly care is indispensable as they bridge gaps between policy intent and real-world application, fostering inclusive environments where marginalized elders can thrive with dignity and respect.

Conclusion:

The elderly population in marginalized communities of Kerala is facing a combination of challenges that require urgent attention and comprehensive solutions. Their quality of life is severely restricted by economic hardships, worsened by systemic inequalities and a lack of awareness about available support. Access to healthcare remains unequal, with many seniors unable to receive timely and sufficient medical care due to both infrastructure deficiencies and cultural stigmas surrounding aging. Social isolation exacerbates these difficulties, as traditional support systems diminish due to urban migration and changing societal norms. While government policies aim to assist this demographic, they often fail to effectively address the unique needs of marginalized groups due to shortcomings in implementation and outreach. NGOs play a crucial role in filling the gaps left by governmental efforts through tailored programs that enhance healthcare access, combat social isolation, and promote economic empowerment among seniors. To uplift the elderly population in these communities, policymakers must adopt a holistic approach that integrates economic support with improved healthcare services and community engagement initiatives. By fostering an inclusive environment that values the contributions of older adults while addressing their specific needs, Kerala can ensure dignity and well-being for its vulnerable elderly citizens amidst ongoing socio-economic adversities.

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