

**“Elderly Healthcare: Challenges, Economic Impact, and Policy
Interventions”**

MAJOR PROJECT REPORT

Semester-3

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(DESIGN YOUR DEGREE)

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CERTIFICATE

The work embodied in this report entitled "**Elderly Healthcare: Challenges, Economic Impact, and Policy Interventions**" has been done by the team including group members- Diya Rani, Neamat Kour, Sarnish Kour, Suhani Behl and Vidhita Arora as a Major Project for Semester 3 of Four-Year Undergraduate Programme (Design Your Degree). This work was carried out under the guidance of Mentor Dr. Shallu Sehgal for the partial fulfilment for the award of the Design Your Degree, Four Year Undergraduate Programme, University of Jammu, Jammu and Kashmir. This project report has not been submitted anywhere else.

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ABSTRACT

Elderly healthcare is a crucial aspect of social and medical well-being, particularly as the aging population grows. This project aims to examine the challenges faced by senior citizens in accessing healthcare services, managing medical expenses, and understanding government support schemes. The study explores key issues such as affordability, accessibility, financial dependency, insurance coverage, and awareness of available healthcare programs. Additionally, it highlights the impact of rising medical costs on the elderly, emphasizing the economic strain and social consequences of inadequate healthcare support. The research also focuses on the mental and emotional well-being of elderly individuals, addressing concerns like loneliness, lack of social engagement, and limited access to mental health services. By analysing these factors, the project aims to identify gaps in the existing healthcare system and propose effective solutions to improve elderly healthcare services. It advocates for better financial assistance programs, increased awareness of government schemes, expanded health insurance coverage, and enhanced community-based healthcare initiatives. The study underscores the need for a holistic approach that integrates medical, financial, and social support to ensure a dignified and healthy life for the elderly population.

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CHAPTER 1

INTRODUCTION

1.1 Elderly HealthCare

Elderly health care is a crucial aspect of social well-being, especially in today's society, where an increasing number of senior citizens live alone without adequate support. With the rise in life expectancy, the elderly population has grown significantly, leading to a higher demand for healthcare services tailored to their specific needs. Aging is often accompanied by various health issues, including chronic illnesses, reduced mobility, and a general decline in physical and mental well-being. As a result, elderly individuals require consistent medical attention, regular health check-ups, and financial stability to manage their healthcare expenses effectively [1].

One of the major challenges in elderly healthcare is the financial burden associated with medical treatments and medicines. Many elderly individuals rely on pensions, family support, or limited savings as their primary sources of income. However, these financial resources are often insufficient to cover the rising costs of healthcare, making it difficult for them to access essential medical services. Additionally, a significant portion of the elderly population is unaware of government healthcare schemes and social security benefits designed to support them [2]. The lack of awareness and accessibility to these schemes further exacerbates their struggles in receiving proper healthcare. To gain a deeper understanding of the healthcare needs of the elderly, we conducted a comprehensive survey focusing on key factors such as medical expenses, sources of income, awareness and utilization of government healthcare schemes, and overall accessibility to medical services. Through this data collection, we aim to identify critical gaps in elderly healthcare and analyse the extent to which existing policies and financial assistance programs are benefiting them [3].

This study will help shed light on the healthcare challenges faced by the elderly and provide insights into possible interventions that can improve their quality of life. By understanding the financial, social, and healthcare-related difficulties they encounter, we can propose measures to enhance their well-being, ensure better healthcare accessibility, and promote awareness about available support systems.

1.2 Literature Review

The advancement of wearable technology and Internet of Things (IoT) has significantly transformed remote healthcare, particularly for the elderly population. The growing need for continuous health monitoring due to an aging global population has led researchers to explore various wearable sensor technologies that can enhance the quality of life and reduce healthcare costs.

- 1. Role of Wearable Devices in Elderly Healthcare** Wearable sensors and smart devices have been extensively used for real-time health monitoring. These devices track physiological parameters such as heart rate, blood pressure, glucose levels, and oxygen saturation. Olmedo-Aguirre et al. (2022) discuss how these sensors can detect early signs of chronic diseases and provide timely intervention, significantly improving elderly healthcare outcomes [4].
- 2. Internet of Things (IoT) and Health Monitoring** The integration of IoT in healthcare has enabled seamless connectivity between wearable devices and healthcare providers. IoT-based health monitoring systems transmit real-time health data to cloud platforms for analysis, allowing healthcare professionals to make informed decisions remotely (Wang et al., 2017). This connectivity reduces hospital visits and enhances preventive healthcare strategies [5].
- 3. Chronic Disease Management through Wearables** Chronic conditions such as cardiovascular diseases, diabetes, and respiratory disorders require continuous monitoring. Studies indicate that wearable biosensors help in tracking health metrics, alerting caregivers in case of anomalies (Leirós-Rodríguez et al., 2018). These technologies improve the self-management of chronic diseases, reducing dependency on in-person medical consultations [6].
- 4. Fall Detection and Emergency Response** Falls are a leading cause of injury among the elderly. Wearable devices equipped with accelerometers and gyroscopes can detect falls and send automatic alerts to caregivers or emergency services (Rucco et al., 2019). Machine learning algorithms further enhance the accuracy of fall detection by distinguishing between normal activities and real falls [7].
- 5. FDA-Approved Wearables for Health Monitoring** The reliability and accuracy of wearable healthcare devices are critical concerns. Many commercial wearables, such as continuous glucose monitors and ECG-enabled smartwatches, have received FDA

approval, ensuring their efficacy in health monitoring (Stavropoulos et al., 2020). The approval process ensures that these devices meet clinical-grade standards for remote patient monitoring [8].

Conclusion

The use of wearable devices for elderly healthcare has revolutionized remote monitoring, enabling continuous tracking of vital health parameters. While challenges such as security and interoperability remain, advancements in IoT and AI-driven analytics promise a future of more efficient and effective elderly healthcare solutions. Continued research and technological improvements will ensure the widespread adoption and success of wearable healthcare monitoring.

CHAPTER 2

FORMULATION OF PROBLEM STATEMENT AND DERIVATION OF PROJECT OBJECTIVES

2.1 Problem Statement

With the rising trend of elderly people living alone, there is an urgent need to provide them with better healthcare support. Many of them face difficulties in managing medical expenses, lack awareness about available healthcare schemes, and struggle with accessibility to proper treatment. Ensuring that they receive adequate medical care, financial assistance, and social support is essential for improving their quality of life.

2.2 Significance of the Study

Elderly health care is a critical aspect of social and medical well-being, ensuring that senior citizens lead a dignified, healthy, and fulfilling life. As individuals age, their physical and mental health often decline, making proper healthcare essential. Below are some key reasons why elderly health care is important:

1. **Increased Health Issues with Aging** – Older adults are more prone to chronic diseases such as diabetes, hypertension, arthritis, and cardiovascular issues. Regular medical check-ups, proper medication, and preventive healthcare help in managing these conditions effectively.
2. **Financial Burden and Healthcare Costs** – Many elderly individuals rely on limited sources of income such as pensions or family support. Managing medical expenses can be challenging, making it necessary to provide affordable healthcare and financial aid programs.
3. **Awareness and Accessibility to Healthcare Services** – Many elderly individuals are unaware of government healthcare schemes and facilities that can support them. Educating them about these schemes ensures they receive the benefits they deserve.
4. **Mental and Emotional Well-being** – Aging is often accompanied by loneliness, depression, and anxiety, especially for elderly individuals living alone. Proper healthcare includes mental health support, counselling, and community engagement programs to improve their emotional well-being.

5. **Prevention of Neglect and Elder Abuse** – Many elderly individuals face neglect and abuse due to physical or financial dependency. Ensuring proper healthcare and social support systems help protect their rights and improve their quality of life.

2.3 Outcomes

The study on **Elderly Health Care** provided valuable insights into the challenges faced by elderly individuals regarding their health, financial stability, and awareness of government support schemes. The key outcomes of the study are as follows:

1. **Medical Expenses and Financial Burden** – The study revealed that a significant portion of elderly individuals' income is spent on medicines and healthcare services. Many of them face financial difficulties in managing these expenses, relying primarily on pensions, family support, or savings.
2. **Limited Awareness of Government Schemes** – A considerable number of elderly individuals were found to be unaware of existing government healthcare schemes and benefits designed to support them. Those who were aware of such schemes often lacked the knowledge or assistance to avail them.
3. **Lack of Accessible Healthcare Facilities** – Many elderly individuals reported difficulty in accessing proper healthcare due to mobility issues, lack of transportation, or unavailability of nearby medical facilities.
4. **Mental and Emotional Challenges** – The study highlighted that loneliness, stress, and mental health issues are common among elderly individuals, especially those living alone. The absence of social engagement and emotional support further exacerbates their health problems.

2.4 Objective

1. To design, implement and assess a healthcare support system for elderly individuals living alone, addressing both physical and mental well-being while analysing the economic impact of healthcare on their lives.

CHAPTER 3

METHODOLOGY

1.1 Methodology of the Study

The study on '**Elderly Health Care**' was conducted to understand the healthcare needs, financial challenges, and accessibility issues faced by elderly individuals. A structured approach was followed to ensure comprehensive data collection and analysis. The key steps of the study are outlined below:

1. **Formulating Objectives and Problem Statement** – The research objectives were defined, focusing on elderly healthcare needs, financial burden, and awareness of government schemes. The study aimed to identify challenges and propose possible improvements.
2. **Sample Selection** – After consulting with mentors, it was decided that the research sample would consist of **50 elderly individuals** from diverse backgrounds to gather a broad perspective on healthcare-related issues.
3. **Data Collection Method** – Primary data was collected through **field surveys** using a well-structured **interview schedule**. The questionnaire was designed to capture relevant information about elderly healthcare needs, financial conditions, and personal experiences.
4. **Interview Schedule Structure** – The interview schedule was divided into four key sections to ensure comprehensive data collection: Section A for demographics, Section B for healthcare needs, Section C for economic challenges and Section D for awareness of government schemes, from 50 elderly respondents.
5. **Pilot Study and Finalization** – Before conducting the full-scale survey, a **pilot study** was conducted to test the questionnaire and refine any unclear questions.
6. **Survey Execution** – Teams were divided into two groups to conduct interviews effectively, ensuring smooth data collection.

3.2 Data Analysis and Interpretation

Once the **primary data** was collected, it was systematically tabulated and analyzed using **statistical tools** such as averages and percentages. This analysis helped in understanding:

- The extent of healthcare accessibility among elderly individuals.

- The financial burden of medical expenses.
- Awareness levels and gaps in government support schemes.
- Elderly individuals' perspectives and recommendations for improving healthcare services.

These findings provided valuable insights into the **current state of elderly healthcare** and **suggested measures to enhance their well-being**.

CHAPTER 4

RESULTS AND DISCUSSIONS

The following chapter 5 deals with the result and analysis. The chapter is divided into 4 sections i.e.

Section A: Demographic Profile: Analyses the age, marital status, living conditions, employment status, and income sources of the respondents.

Section B: Healthcare Needs and Accessibility: Examines medical expenses, frequency of doctor visits, healthcare accessibility, and challenges faced.

Section C: Economic Challenges and Financial Impact: Assesses the financial burden of healthcare costs and sources of income used for medical expenses.

Section D: Awareness of Government Healthcare Schemes: Evaluates respondents' knowledge and utilization of available healthcare schemes and benefits.

4.1 SECTION A: This section focuses on the personal information of respondents

This present section focuses on age, marital status, living situation, employment status, annual household income, and main source of income. This section helps to understand the demographic background and financial situation of the elderly individuals participating in the study.

4.1.1 Age of the Respondents

Observation: The majority of respondents fall in the 61-70 age group (37 respondents), which represents the largest proportion. The 71-80 age group has 10 respondents, showing a decline in participation. Only 3 respondents are 81 and above, indicating lower representation in this age bracket. The data suggests that most respondents are in their early senior years (60s), while participation decreases with increasing age. This may indicate health, mobility, or technological literacy factors influencing survey participation.

Table: 4.1.1 Age of Respondents

Age	Respondents
61-70	37
71-80	10
81 and above	3

Source: Field Survey

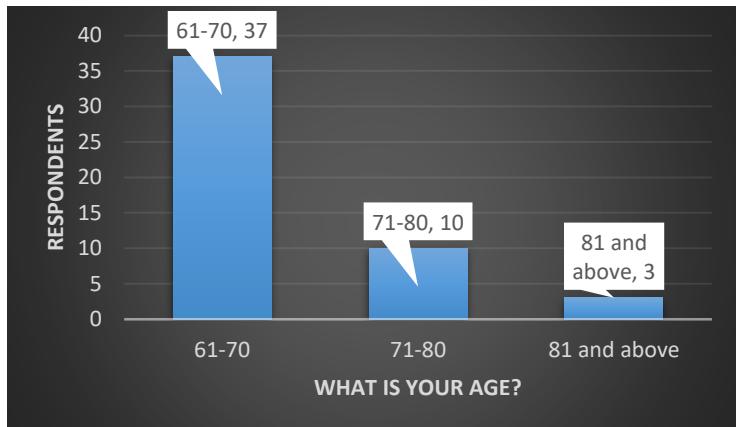


Fig 4.1.1 Age of the Respondent

Source: Field Survey

4.1.2 Gender of the Respondent

Observation: The gender distribution is fairly balanced, with 26 males (52%) and 24 females (48%). This near-equal distribution ensures that insights from the survey are representative of both genders. The slight male majority could indicate higher survey engagement among men in this sample group.

Table: 4.1.2 Gender of the Respondent

Gender	Respondents
Male	26
Female	24

Source: Field Survey

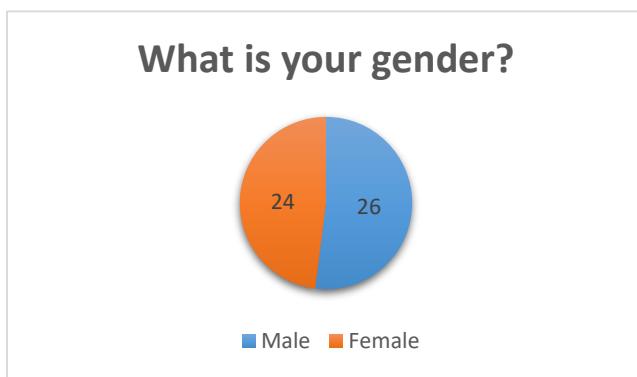


Fig 4.1.2 Gender of the Respondent

Source: Field Survey

4.1.3 Marital Status of Respondent

Observation: Married respondents make up the largest group (25 individuals), indicating that a significant portion of the elderly population surveyed is in a committed relationship. Single respondents (16 individuals) form the second-largest group, showing that a notable portion of the elderly population is not currently in a marital relationship. Widowed individuals (9 respondents) represent a smaller yet significant portion, highlighting the impact of spousal loss on elderly demographics. The data suggests that most elderly individuals have or had a marital partner, but a considerable portion is either single or widowed, which may influence their emotional and social well-being.

Table: 4.1.3 Marital Status of Respondent

What is your marital status?	Respondents
Married	25
Widowed	9
Single	16

Source: Field Survey



Fig 4.1.3 Martial Status of Respondent

Source: Field Survey

4.1.4 Family Structure of Respondent?

Observation: A majority of respondents (31 individuals) live with family, emphasizing the traditional family support system in elderly care. However, 19 respondents live alone or in other arrangements, which could indicate independent living, assisted living, or institutional care. The pie chart visualization clearly shows that while most elderly individuals still rely on family, a significant portion lives separately, which may raise concerns about social isolation or the need for external support services.

Table 4.1.4 Family structure of Respondent?

You live?	Respondents
With family	31
Other	19

Source: Field Survey

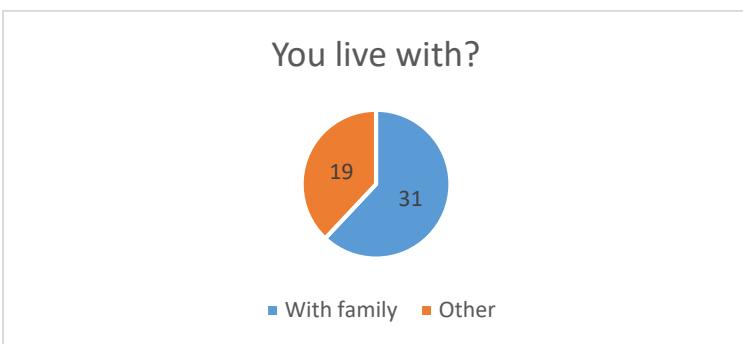


Fig 4.1.4 Family structure of Respondent Source: Field Survey

4.1.5 Employment status of Respondent

Observation: Majority fall under "Other": 29 respondents (largest category) have selected "Other" for employment status, indicating they may be students, homemakers, unemployed, or engaged in non-traditional work. 10 respondents are retired, suggesting a significant proportion of the sample is elderly. Only 7 respondents are employed full-time, with 4 working part-time. The data suggests a population with a diverse mix of employment types, with fewer people in stable full-time jobs.

Table 4.1.5 Employment status of Respondent

Employment status?	Respondents
Full-time	7
Part-time	4
Retired	10
Other	29

Source: Field Survey

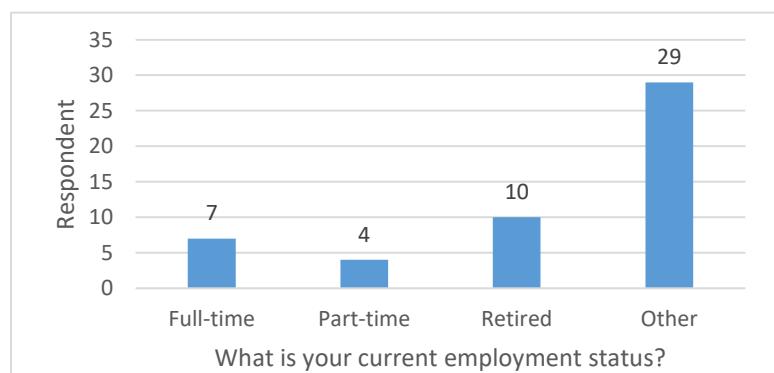


Fig 4.1.5 Employment status of Respondent

Source: Field Survey

4.1.6 Annual household income of Respondent

Observation: Largest group earns below ₹2,00,000: 19 respondents fall into this category, suggesting a significant lower-income population. Moderate distribution in middle-income brackets: 12 respondents earn ₹2,00,000-4,00,000, and 10 earn ₹4,00,000-6,00,000. Higher income group is the smallest: Only 9 respondents earn more than ₹6,00,000, indicating fewer high-income earners. Implication: The majority of the population surveyed belongs to lower-income groups, with fewer respondents in higher financial brackets.

Table 4.1.6 Annual household income of Respondent

Household income	Respondents
Less than 2,00,000	19
2,00,000-4,00,000	12
4,00,000-6,00,00	10
More than 6,00,000	9

Source: Field Survey

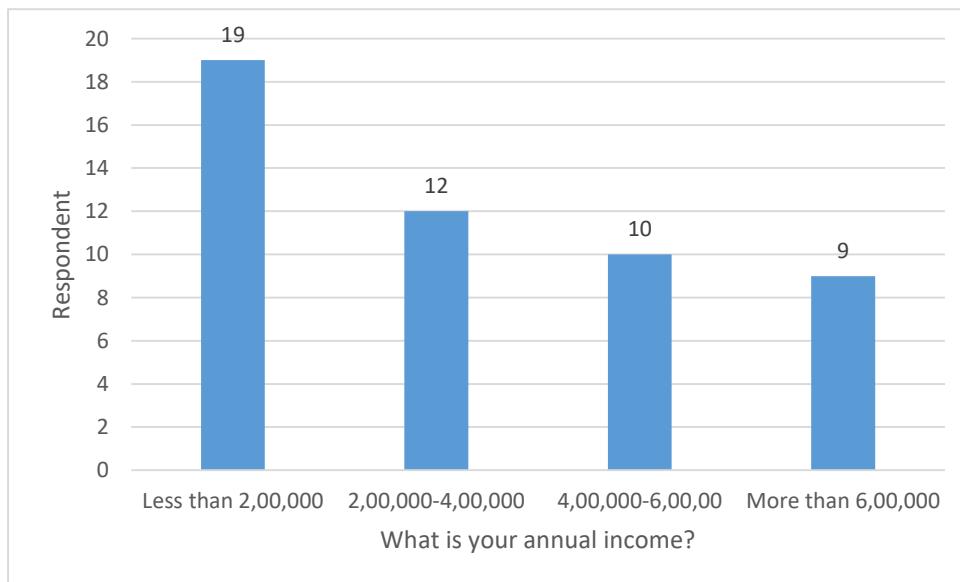


Fig 4.1.6 Annual household income of Respondent

Source: Field Survey

4.1.7 Main source of income of Respondent

Observations: The majority of respondents (19) rely on financial support from family, indicating a strong dependency on loved ones for financial security. Pension is a close second, with 18 respondents citing it as their primary income source, highlighting the importance of pensions for retired individuals. Savings serve as the main source of income for 14 respondents, suggesting that while some individuals rely on their personal savings, this number is lower compared to those depending on family or pension. Other sources of income are the least

common, with only 11 respondents relying on them, indicating that alternative income streams are less prevalent among the group.

Table 4.1.7 Main source of income of Respondent

Main Source of Income	No. of Respondent
Financial support from family	19
Pension	18
Savings	14
Others	11

Source: Field Survey

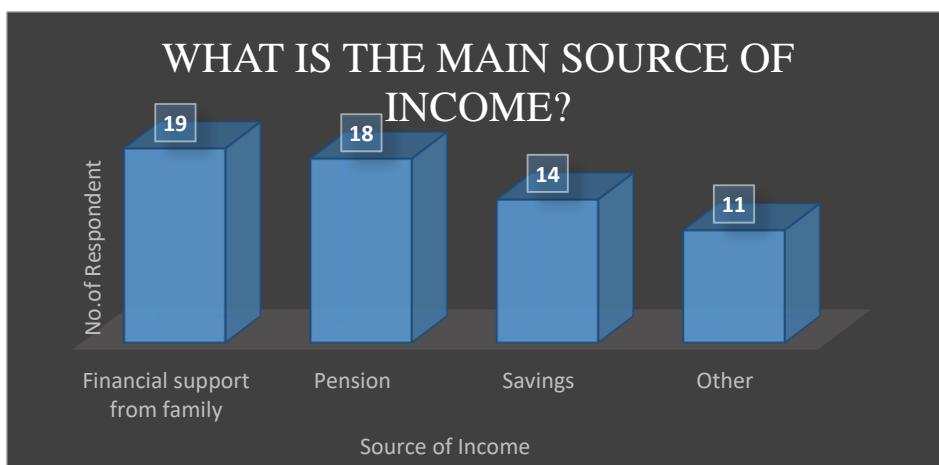


Fig 4.1.6 Annual household income of Respondent

Source: Field Survey

SECTION B: HealthCare Needs and Accessibility

This section examines medical expenses, frequency of doctor visits, accessibility to healthcare facilities, and the challenges faced by elderly individuals in receiving proper medical care. It provides insights into their healthcare needs and the barriers that may hinder their access to essential health services.

4.2.1 How frequently do respondent visit a healthcare facility

Observation: The majority of respondents (20) visit healthcare facilities occasionally, indicating that most individuals seek medical care only when necessary rather than following a regular schedule. This could suggest a generally stable health status where medical attention is needed intermittently. Additionally, 17 respondents visit healthcare facilities on a monthly basis, highlighting that a significant portion requires regular check-ups or ongoing treatments, emphasizing the importance of periodic healthcare for maintaining overall well-being. In contrast, only 6 respondents visit weekly, and 7 rarely seek medical care. The low number of weekly visitors suggests that only a few individuals require frequent medical attention, likely

due to chronic health conditions or continuous treatments. Meanwhile, the small number of rarely visiting individuals may indicate either good health or possible barriers to accessing healthcare, such as financial limitations or lack of awareness.

Table 4.2.1 How frequently do respondent visit a healthcare facility

Visits a HealthCare Facility	No. of Respondent
Weekly	6
Monthly	17
Occasionally	20
Rarely	7

Source: Field Survey

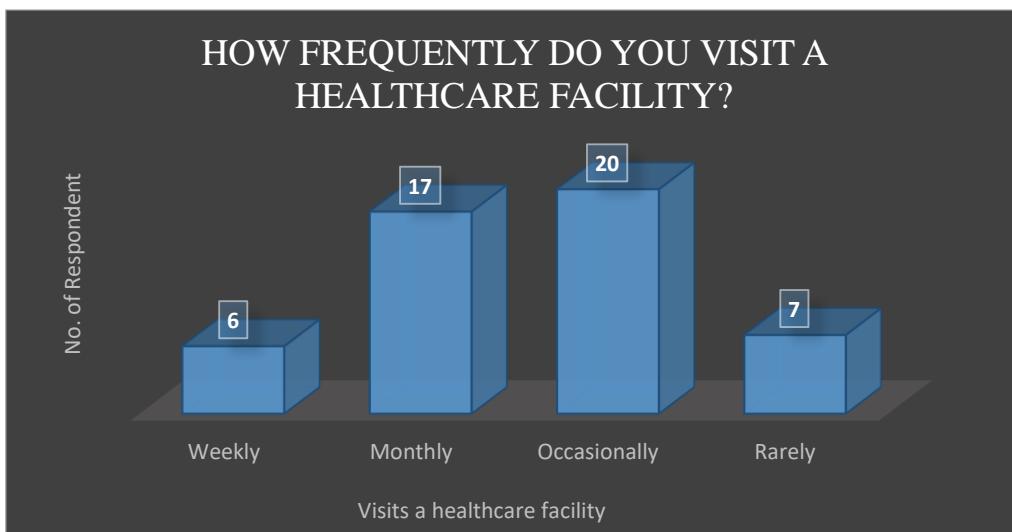


Fig: 4.2.1 How frequently do respondent visit a healthcare facility Source: Field Survey

4.2.2 Primary Source of Healthcare

Observation: The majority of respondents (30) rely on private hospitals for healthcare, indicating a strong preference for private medical services, likely due to better facilities, shorter wait times, and greater trust in private institutions. Government hospitals are the second choice, with 17 respondents utilizing them, suggesting that public healthcare remains a significant option, primarily due to affordability and accessibility, despite potential quality concerns. Minimal dependence on self-treatment and alternative medicine is observed, as only one respondent practices self-treatment, reinforcing that elderly individuals largely prefer professional medical care over self-diagnosis or home remedies. Additionally, only two respondents use alternative medicine, such as Ayurveda, Homeopathy, or Unani, indicating limited acceptance of traditional or complementary healthcare approaches among this population.

Table 4.2.2 Primary Source of Healthcare

Primary Source of HealthCare	No. of Respondent
Govt Hospital	17
Private Hospital	30
Self-Treatment	1
Alternative Medicine Practitioner	2

Source: Field Survey

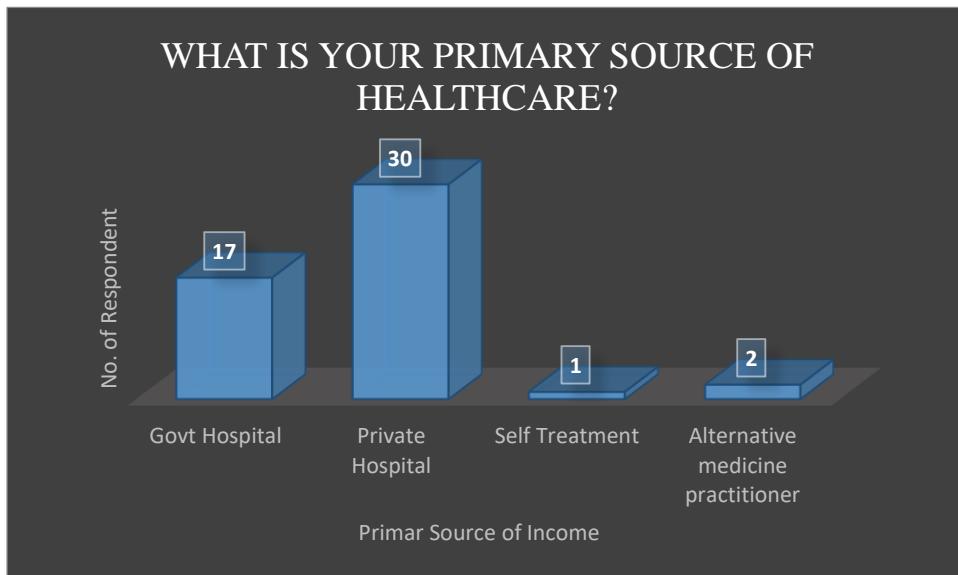


Fig: 4.2.2 Primary Source of Healthcare

Source: Field Survey

4.2.3 Do you have health insurance?

Observation: The majority of respondents (27) do not have health insurance, highlighting a significant gap in financial protection for elderly individuals and making them vulnerable to high medical expenses. In contrast, only 23 respondents have some form of health insurance, which, while positive, is still lower than the uninsured population. This raises concerns about the accessibility and affordability of health insurance for the elderly. Given their increasing medical needs, the lack of coverage could stem from high premiums, lack of awareness, or challenges in obtaining insurance at an older age.

Table 4.2.3 Do you have health insurance?

Health Insurance	No. of Respondent	%Age
Yes	23	46
No	27	54

Source: Field Survey

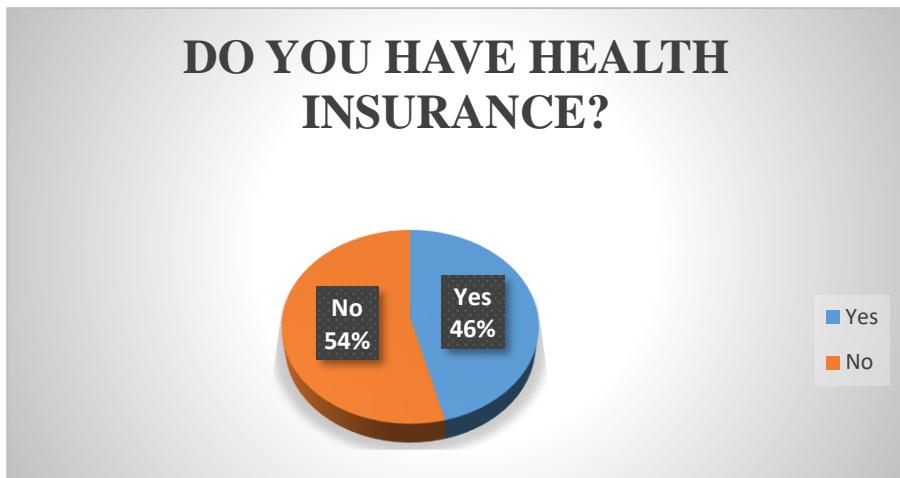


Fig: 4.2.3 Do you have health source?

Source: Field Survey

4.2.4 If yes, does your health insurance cover all your medical expenses?

Observations: The majority of respondents (23) reported that their health insurance only partially covers their medical expenses, indicating that many individuals still have to pay out-of-pocket for some treatments or services, highlighting the limitations of their insurance plans. Only 8 respondents stated that their health insurance fully covers all medical expenses, suggesting that complete coverage is uncommon and that many individuals may face financial burdens when seeking healthcare. Additionally, 18 respondents indicated that their health insurance does not cover any medical expenses, implying that a significant portion of individuals may not have sufficient health insurance or rely on alternative means to manage healthcare costs.

Table 4.2.4 If yes, does your health insurance cover all your medical expenses?

Health Insurance cover all your Medical Expenses	No. of Respondent
Partially	23
Fully	9
Not at all	18

Source: Field Survey

IF YES, DOES YOUR HEALTH INSURANCE COVER ALL YOUR MEDICAL EXPENSES?



Fig: 4.2.4 If yes, does your health insurance cover all your medical expenses?

Source: Field Survey

4.2.5 What types of healthcare services do you use most frequently?

Observation: The majority of respondents (35) rely on general check-ups, indicating a strong focus on routine health monitoring and preventive care. Specialist consultations are the second most used service, with 17 respondents seeking expert medical advice, likely due to age-related health concerns. Medication services are also frequently utilized by 10 respondents, reflecting the prevalence of chronic conditions such as hypertension, diabetes, or arthritis among the elderly. Emergency care usage is relatively low, with only 8 respondents requiring urgent medical attention, suggesting that most health issues are managed proactively. Physiotherapy is used by just 3 respondents, while mental health support is accessed by only 1, indicating either a lower demand or barriers to access, such as lack of awareness, affordability, or stigma surrounding mental health care.

Table 4.2.5 What types of healthcare services do you use most frequently?

HealthCare Services	No. of Respondent
General check-ups	35
Emergency Care	8
Specialist Consultations	17
Medication Management	10
Physiotherapy	3
Mental Health Support	1

Source: Field Survey

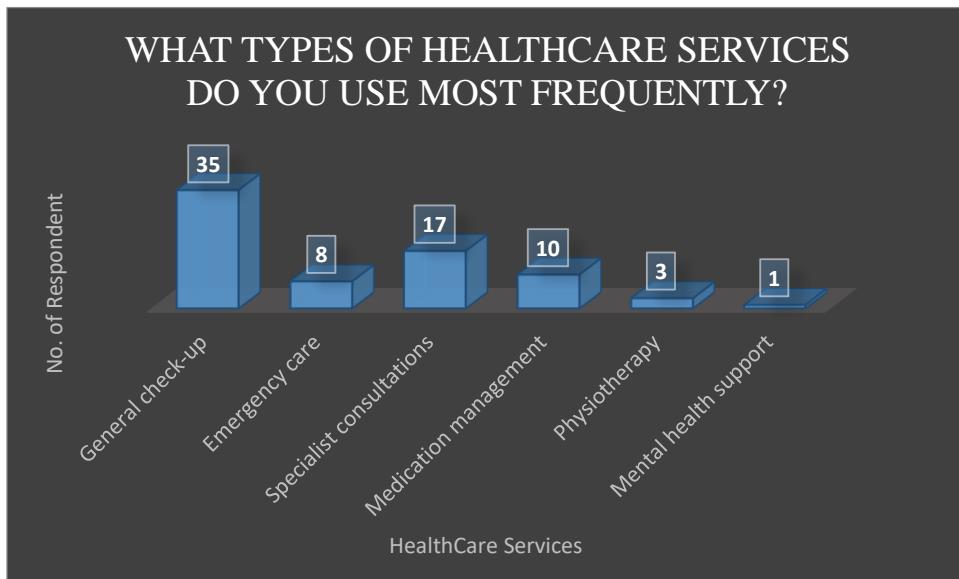


Fig: 4.2.5 What types of healthcare services do you use most frequently? **Source:** Field Survey

4.2.6 How do you currently access healthcare services?

Observations: The pie chart provides a clear breakdown of how elders currently access healthcare services. **84% (42 elders) visit clinics or hospitals** – This is the most common method, indicating that traditional in-person healthcare remains the primary choice. **12% (6 elders) receive home visits by healthcare professionals** – This suggests that a portion of elders prefer or require at-home medical care, possibly due to mobility challenges or chronic conditions. **4% (2 elders) use other means** – This could include telemedicine, community health programs, or alternative care arrangements.

Table 4.2.6 How do you currently access healthcare services?

Access currently health service	no of elders
Visiting clinics/hospitals	42
Home visits by healthcare professionals	2
Other	6

Source: Field Survey

HOW DO YOU CURRENTLY ACCESS HEALTHCARE SERVICES?



Fig: 4.2.6 How do you currently access healthcare services? **Source:** Field Survey

4.2.7 Are the medications affordable for you?

Observations: Majority Find Medicines Affordable: Out of the surveyed elders, 28 respondents (approximately 56%) reported that medications are affordable for them.

Significant Minority Struggles with Affordability: 22 respondents (approximately 44%) indicated that medicines are not affordable for them. **Affordability Concerns Exist:** While more elders find medicines affordable, a considerable proportion still struggles, highlighting a potential issue that may require intervention. **Policy Implications:** Given that nearly half of the respondents face affordability challenges, there may be a need for financial aid, subsidies, or policy changes to improve medication access for elders.

Table 4.2.7 Are the medications affordable for you?

Medicines Affordable	no of elders
Yes	28
No	22

Source: Field Survey

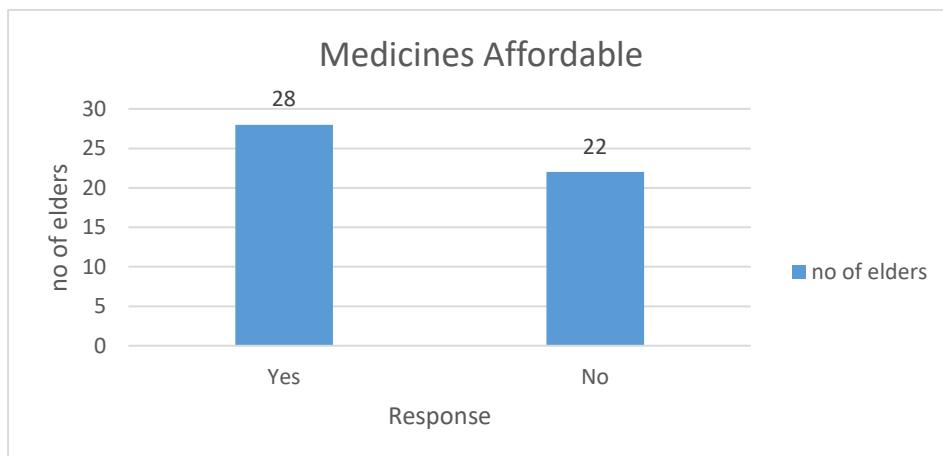


Fig: 4.2.7 Are the medications affordable for you?

Source: Field Survey

4.2.8 Do you take regular medications?

Observations: 32 elders (64%) reported taking regular medications. 18 elders (36%) stated they do not take regular medications. The high percentage of elders taking regular medications suggests a prevalent need for ongoing medical treatment, possibly for chronic conditions. Given that a majority depend on medications, ensuring affordability, accessibility, and adherence support (such as medication reminders or financial aid) could be beneficial.

Table 4.2.8 Do you take regular medications?

Take Regular Med	no of elders
Yes	32
No	18

Source: Field Survey

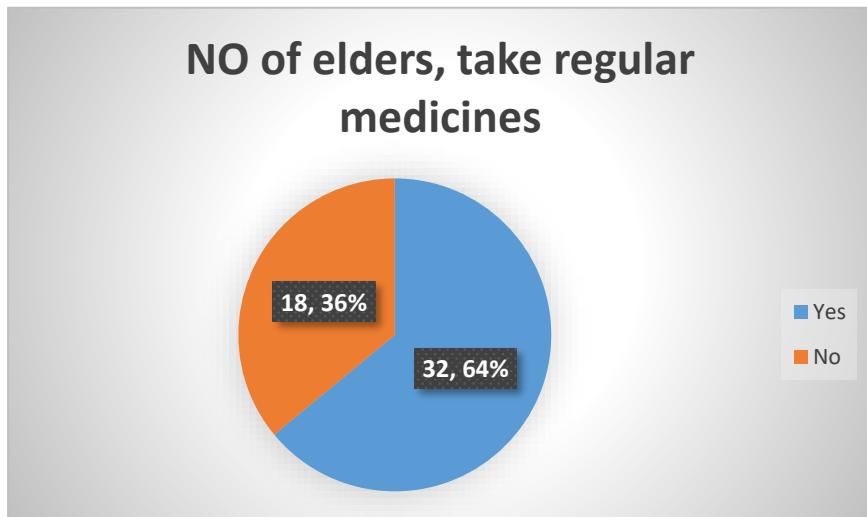


Fig: 4.2.8 Do you take regular medications?

Source: Field Survey

4.2.9 What is the approximate amount of money you spend on healthcare each month?

Observation: The chart provides information on the monthly spending of elders, categorized by different spending ranges. If you're trying to estimate how much money elders approximately spend on healthcare each month based on this chart, you can make an estimate using the most common spending ranges. The majority (21 elders) spend between ₹1,000–₹5,000. A significant number (13 elders) spend between ₹5,000–₹10,000. A smaller portion (8 elders) spend more than ₹10,000. A few (6 elders) spend less than ₹1,000. Only 2 elders spend less than ₹2,000. Based on this data, the approximate amount of money elders typically spend on healthcare each month likely falls in the **₹1,000–₹10,000 range**, with the most common spending level being between ₹1,000 and ₹5,000.

Table 4.2.9 What is the approximate amount of money you spend on healthcare each month?

Money spend on health each month	no of elders
Less than ₹2,000	2
₹1,000–₹5,000	21
₹5,000–₹10,000	13
Less than ₹1,000	6
More than ₹10,000	8

Source: Field Survey

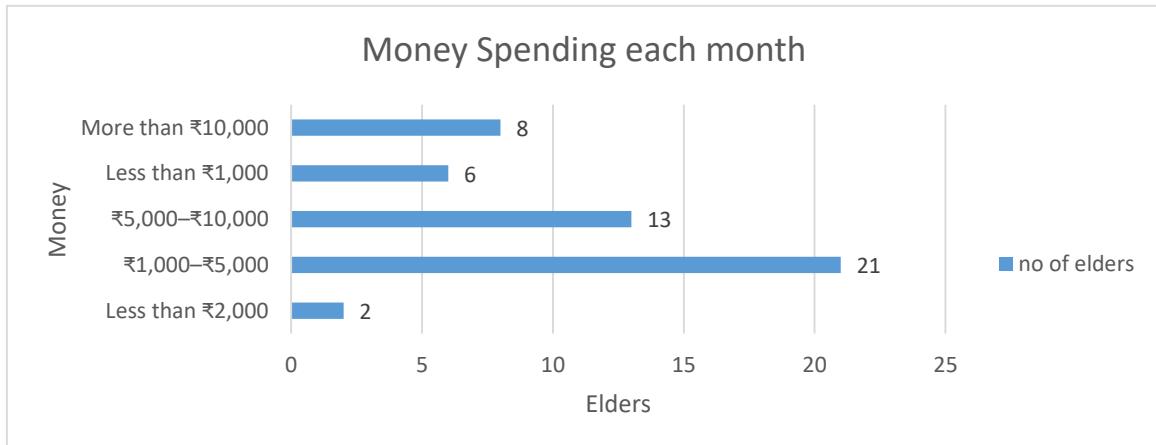


Fig: 4.2.8 What is the approximate amount of money you spend on healthcare each month? Source: Field Survey

4.2.10 Have your healthcare costs increased significantly in the past five years?

Observations: The pie chart clearly shows that a majority (84%) of respondents have experienced a significant increase in healthcare costs over the past five years, while only 16% reported no increase. This suggests that rising medical expenses are a widespread concern, likely driven by factors such as inflation, higher insurance premiums, increased medical needs, and the rising costs of treatments and medications. The data highlights that healthcare affordability has become a challenge for most elders, indicating a pressing need for financial planning and policy interventions to address these growing expenses.

Table 4.2.10 Have your healthcare costs increased significantly in the past five years?

Healthcare cost increased on last 5 years	no of elders
Yes	42
No	8

HEALTHCARE COST INC IN LAST 5 YEARS FOR NO OF ELDERS

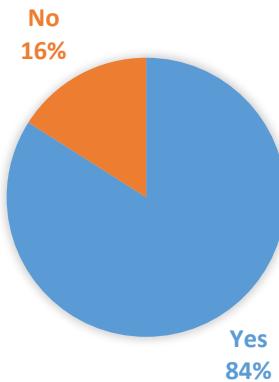


Fig: 4.2.9 Have your healthcare costs increased significantly in the past five years? **Source:** Field Survey

SECTION C: Economic Challenges and Financial Impact

This section assesses the financial burden of healthcare costs on elderly individuals and identifies the various sources of income used to manage medical expenses. It helps in understanding the economic challenges faced by the elderly in accessing proper healthcare.

4.3.1 What is the most significant financial burden related to healthcare?

Observation: The pie chart illustrates different types of financial burdens related to healthcare, categorized into doctor consultation fees, diagnostic tests, medicine costs, and hospitalization expenses. According to the chart, medicine costs account for the highest proportion, representing 42% of the total financial burden. This indicates that purchasing medications is the most significant expense in healthcare, possibly due to the high cost of prescription drugs and long-term medication requirements for chronic illnesses. Diagnostic tests account for 22%, while doctor consultation fees and hospitalization expenses each contribute 18% to the overall financial burden. These figures suggest that while medical consultations and hospital stays are costly, the most substantial financial strain comes from the continuous expenditure on medicines. Therefore, addressing the affordability and accessibility of medications could significantly reduce the overall healthcare cost burden on individuals.

Table 4.3.1 What is the most significant financial burden related to healthcare?

Financial Burden	no of elders
Doctor consultation fees	9
Diagnostic tests	11
Medicine costs	21
Hospitalization expenses	9

Source: Field Survey

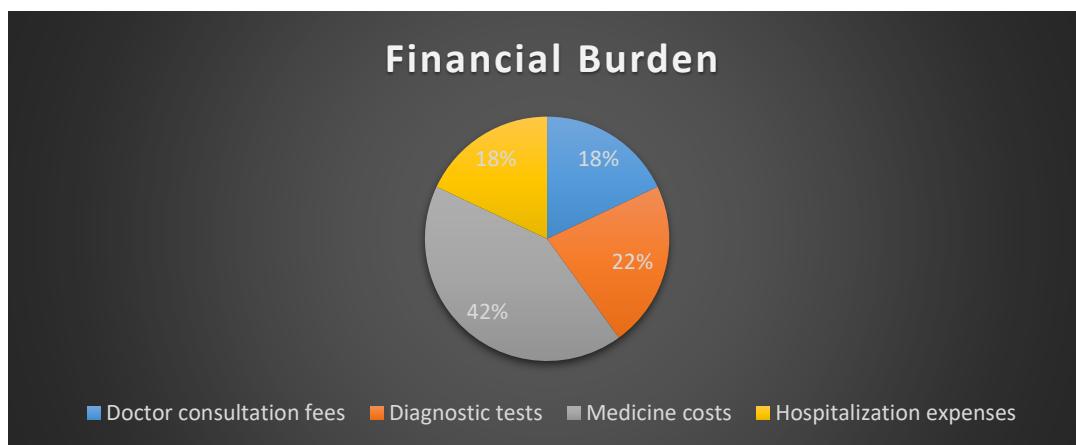


Fig: 4.3.1 What is the most significant financial burden related to healthcare? Source: Field Survey

4.3.2 Have you ever delayed or avoided medical treatment due to financial constraints?

Observation: Out of the respondents, **16 people** reported delaying medical treatment because of financial difficulties, while **34 people** did not face such delays. This suggests that while financial struggles impact some elderly individuals, the majority (over two-thirds) are still able to access medical care without postponement. However, those who do delay treatment may be at higher risk of worsening health conditions due to a lack of timely intervention.

Table 4.3.2 Have you ever delayed or avoided medical treatment due to financial constraints?

Delayed medical treatment due to financial constraints	NO. of elders
Yes	16
No	34

Source: Field Survey

Delayed medical treatment due to financial constraints



Fig: 4.3.2 Have you ever delayed or avoided medical treatment due to financial constraints?

Source: Field Survey

4.3.3 Have you ever adjusted your spending in other areas due to healthcare costs?

Observation: 16 individuals had to cut back on other expenses due to healthcare costs, whereas 34 individuals did not make such adjustments. This indicates that a segment of the elderly population experiences financial strain from medical expenses, forcing them to prioritize healthcare over other essential needs. However, the majority appear to manage their healthcare costs without major sacrifices in other spending areas.

Table 4.3.3 Have you ever adjusted your spending in other areas due to healthcare costs?

Adjusted your spending in other areas due to healthcare costs	NO. of elders
Yes	16
No	34

Source: Field Survey

Respondent

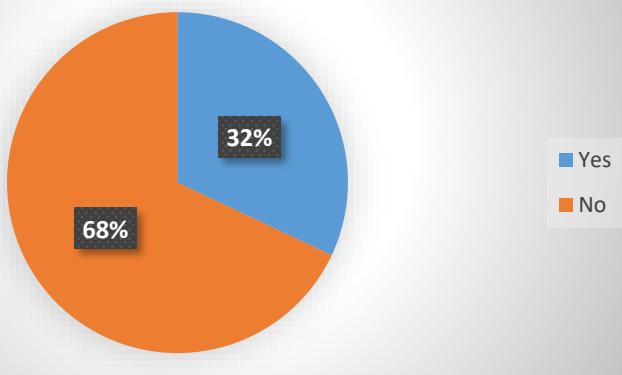


Fig: 4.3.3 Have you ever adjusted your spending in other areas due to healthcare costs?

Source: Field Survey

4.3.4 Have you ever receive any government assistance for healthcare?

Observation: Only 7 individuals receive financial support from the government for their healthcare needs, while 43 individuals do not. This means that a vast majority (over 85%) of elderly individuals rely on personal funds, family support, or other means to cover their medical expenses. The low rate of government assistance could indicate gaps in awareness, eligibility criteria, or accessibility of aid programs.

Table 4.3.4 Have you ever received any government assistance for healthcare?

Receive any government assistance for healthcare	No. of elders
Yes	7
No	43

Source: Field Survey

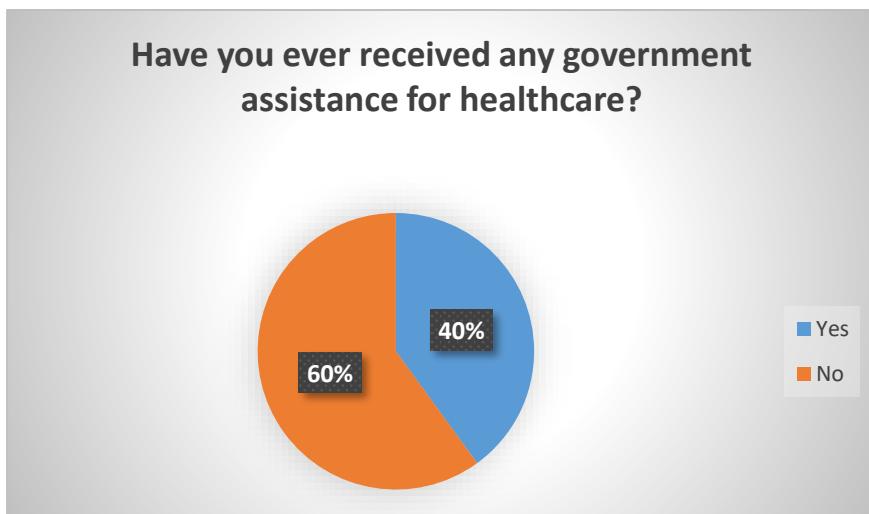


Fig: 4.3.4 Have you ever received any government assistance for healthcare? **Source:** Field Survey

4.3.5 Are you aware of any government or community programs that provide financial support for elderly healthcare?

Observations: **20 people** are aware of government or community programs that provide financial support for elderly healthcare, whereas **30 people** are not. This highlights a significant gap in information, with 60% of respondents unaware of potential financial aid. Increasing awareness and accessibility to such programs could help alleviate financial burdens on the elderly.

Table 4.3.5 Are you aware of any government or community programs that provide financial support for elderly healthcare?

Aware of any government or community programs that provide financial support for elderly healthcare	NO. of elders
Yes	20
No	30

Source: Field Survey

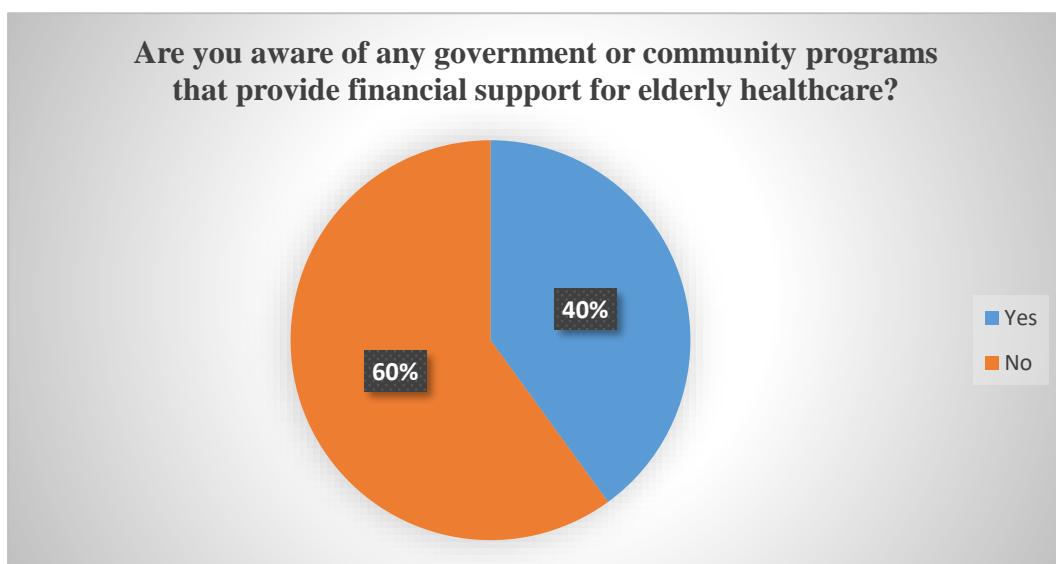


Fig: 4.3.5 Are you aware of any government or community programs that provide financial support for elderly healthcare?

Source: Field Survey

4.3.6 Have you ever faced financial challenges are the most significant in managing your healthcare?

Observation: The biggest financial concern among elderly individuals is high out-of-pocket expenses, affecting 22 people. 18 people struggle with limited income, making it difficult to afford medical costs. Only 4 people cited lack of insurance coverage, indicating that insurance availability might not be the primary issue. Additionally, 6 people reported facing other financial concerns. This analysis suggests that direct healthcare costs are the most pressing issue for elderly individuals, followed closely by income limitations.

Table 4.3.6 Have you ever faced financial challenges are the most significant in managing your healthcare?

Financial challenges are the most significant in managing your healthcare	NO. of elders
High out-of-pocket expenses	22
Limited income	18
Lack of insurance coverage	4
Other	6

Source: Field Survey



Fig: 4.3.6 Have you ever faced financial challenges are the most significant in managing your healthcare?

Source: Field Survey

4.3.7 Would you consider a paid home healthcare support service if it reduced your overall healthcare costs?

Observation: Out of the total respondents, **34 people (68%)** expressed willingness to consider a **paid home healthcare support service** if it could reduce their overall healthcare expenses. However, **16 respondents (32%)** were not in favor. This indicates that while a majority value the potential cost savings and convenience of home healthcare, a significant portion may either not trust the efficiency of such services or may already have alternative solutions for their healthcare needs.

Table 4.3.7 Would you consider a paid home healthcare support service if it reduced your overall healthcare costs?

Paid home healthcare support service if it reduced your overall healthcare costs	Respondent
Yes	34
No	16

Source: Field Survey

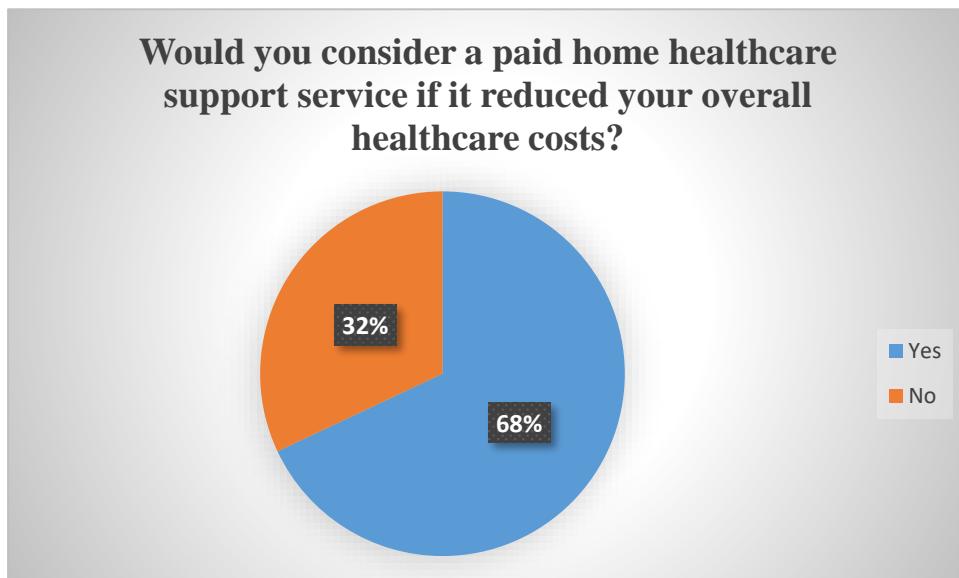


Fig: 4.3.7 Would you consider a paid home healthcare support service if it reduced your overall healthcare costs?

Source: Field Survey

4.3.8 What would you consider an affordable monthly fee for such a service?

Observation: The majority of respondents (**33 people**) preferred a **monthly fee of less than ₹4,000**, highlighting a strong preference for affordability. **14 respondents** were comfortable with a price range of **₹4,000–₹8,000**, while only **1 respondent** was willing to pay between **₹8,000–₹16,000**. **2 respondents** considered more than **₹16,000** as a reasonable price. This data suggests that for a home healthcare support service to be widely accepted, it must be priced within the lower range of **₹4,000 or less** to cater to the majority of potential users.

Table 4.3.8 What would you consider an affordable monthly fee for such a service?

Affordable monthly fee for such a service	Respondent
₹4,000–₹8,000	14
₹8,000–₹16,000	1
Less than ₹4,000	33
More than ₹16,000	2

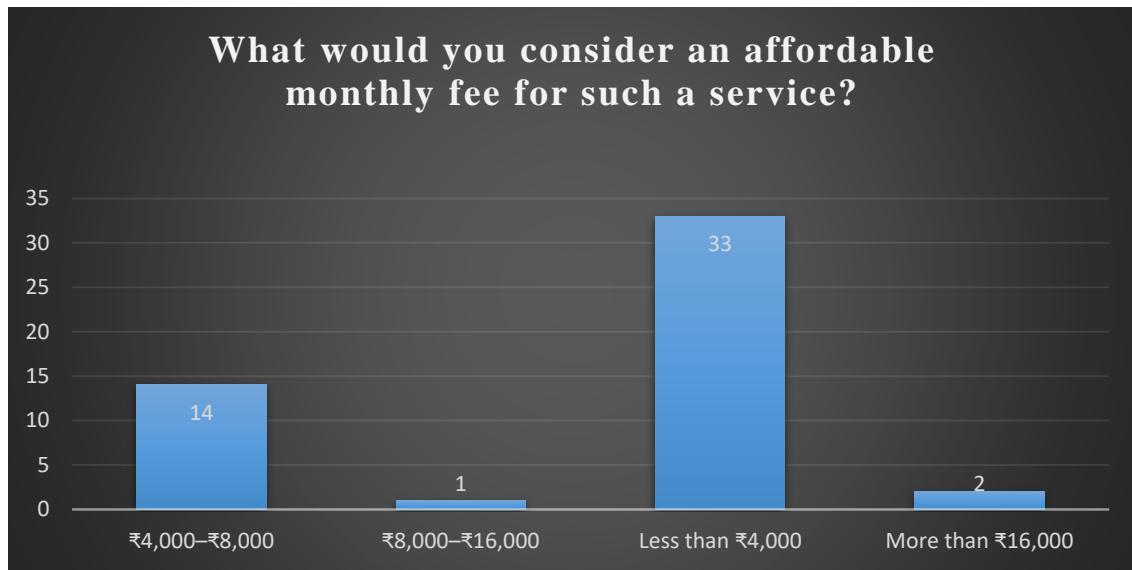


Fig: 4.3.8 What would you consider an affordable monthly fee for such a service **Source:** Field Survey

SECTION D: Awareness of Government Healthcare Schemes

This section evaluates the respondents' knowledge of existing government healthcare schemes and their utilization of these benefits. It highlights the awareness levels among the elderly and identifies gaps in accessing available healthcare support programs.

4.4.1 Do you believe economic policies should prioritize elderly healthcare funding?

Observation: A large majority (46 respondents or 92%) strongly believe that **government economic policies should prioritize elderly healthcare funding**, while only 4 people (8%) disagreed. This clearly reflects widespread support for increased government intervention and financial backing in elderly healthcare, suggesting that a significant portion of the population sees elderly health as a crucial area requiring more policy-driven investments.

Table 4.4.1 Do you believe economic policies should prioritize elderly healthcare funding?

Paid home healthcare support service if it reduced your overall healthcare costs	Respondent
Yes	46
No	4

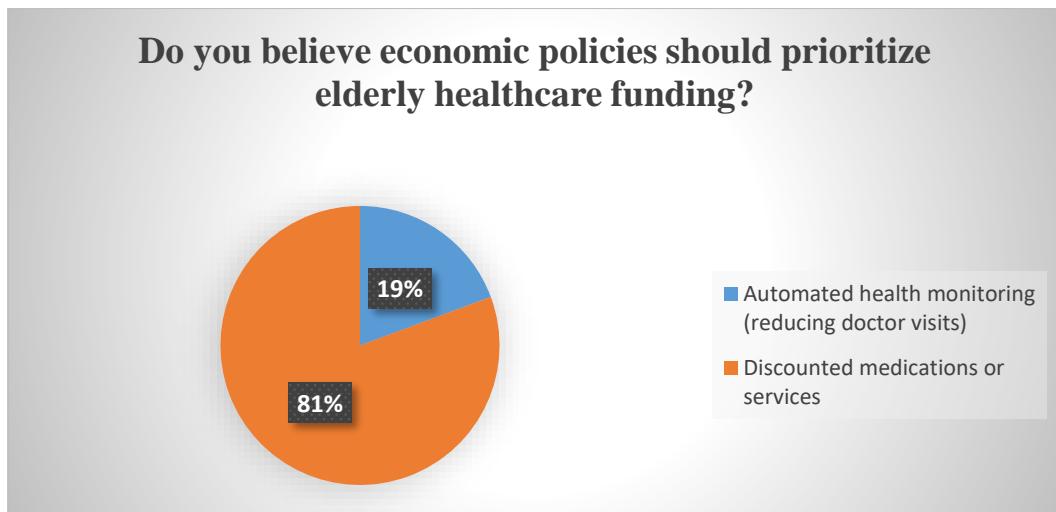


Fig: 4.4.1 Do you believe economic policies should prioritize elderly healthcare funding? **Source:** Field Survey

4.4.2 What features of a healthcare support system would you find most economically valuable?

Observation: The most preferred feature in a healthcare support system was **discounted medications or services (25 respondents)**, indicating that affordability in medication is a top concern. **11 people** valued **reduced travel costs for consultations**, suggesting that transportation expenses significantly impact their healthcare budget. **Automated health monitoring (6 respondents)** was seen as beneficial in reducing doctor visits, whereas only **3 respondents** considered an **emergency response system** to be a primary economic factor. **5 people** had other preferences. The responses suggest that cost-saving measures, particularly in medication and consultation expenses, are key factors when considering healthcare service value.

Table 4.4.2 What features of a healthcare support system would you find most economically valuable?

healthcare support system would you find most economically valuable	Respondent
Automated health monitoring (reducing doctor visits)	6
Discounted medications or services	25
Emergency response system	3
Other	5
Reduced travel costs for consultations	11

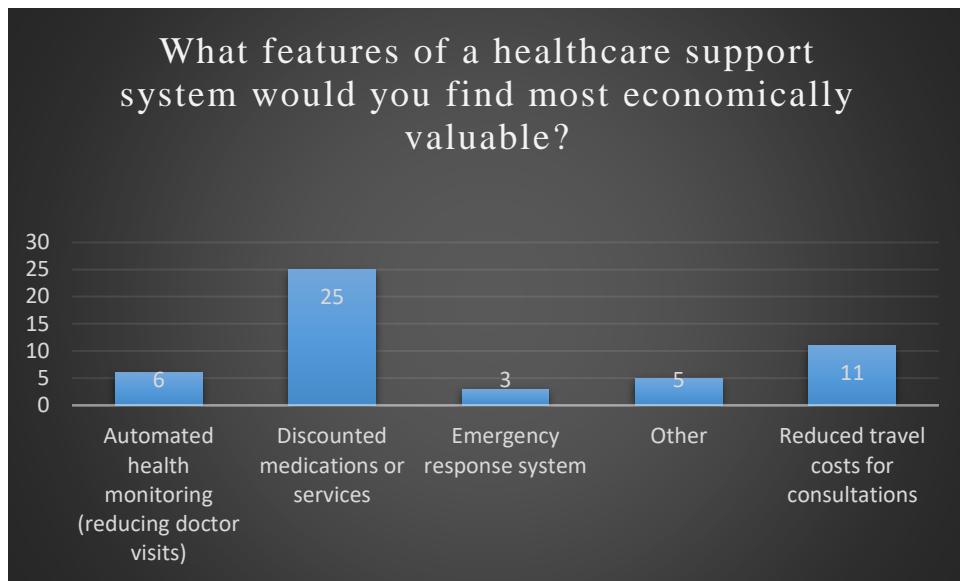


Fig: 4.4.2 What features of a healthcare support system would you find most economically valuable?

Source: Field Survey

4.4.3 Do you feel your current healthcare spending is sustainable in the long term?

Observation: A significant **majority (37 respondents or 74%)** stated that their current **healthcare expenses are not sustainable** in the long run, while only **13 people (26%)** believed their spending was manageable. This highlights the financial strain healthcare costs place on individuals, particularly in the context of long-term affordability. The data suggests an urgent need for cost-effective healthcare solutions, including government interventions and insurance-based models, to ensure long-term financial sustainability for patients.

Table 4.4.3 Do you feel your current healthcare spending is sustainable in the long term?

current healthcare spending is sustainable in the long term	Respondent
Yes	13
No	37

Source: Field Survey

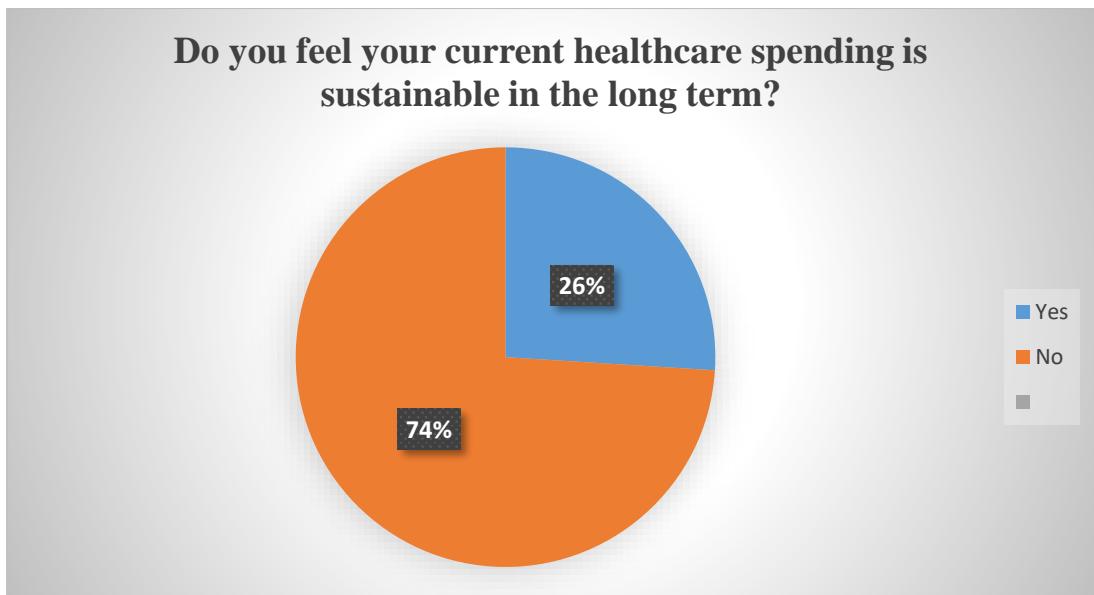


Fig: 4.4.3 Do you feel your current healthcare spending is sustainable in the long term? **Source:** Field Survey

CHAPTER 5

CONCLUSION

The study on **Elderly Healthcare** aimed to assess the challenges faced by senior citizens in accessing medical care, managing healthcare expenses, and understanding government support schemes while analysing the economic burden and overall impact on their well-being. With the increasing elderly population, healthcare accessibility has become a critical issue, as many senior citizens live alone or rely on limited financial resources such as pensions, savings, or family support. The study found that a significant portion of elderly individuals struggle with **high medical costs**, with expenses for medicines, hospital visits, and diagnostic tests forming the most substantial financial burdens. **Around 42% of respondents reported that medicine costs were their most significant financial challenge, followed by 22% for diagnostic tests and 18% for hospitalization expenses.** Many elders lack **health insurance coverage**, and even those with insurance often find that their plans only **partially cover** medical expenses, forcing them to spend large amounts out-of-pocket. **Only 8% of insured individuals reported full coverage of their medical expenses, while 46% had partial coverage and 36% received no insurance benefits at all.** This financial strain is further exacerbated by the rising cost of healthcare, with **84% of respondents reporting a significant increase in medical expenses over the past five years.** Additionally, the study highlighted that many elderly individuals remain **unaware of government healthcare schemes and financial aid programs**, with over **60% of respondents having no knowledge of such initiatives.** Even among those who are aware, **only 14% successfully availed of government assistance**, indicating gaps in accessibility, outreach, and implementation of these welfare programs.

The research also examined the **economic impact** of healthcare expenses on the elderly, revealing that a considerable number of them had to **adjust their spending on other essential needs** such as food, utilities, and social activities to afford medical care. **About 32% of respondents reported reducing their spending on food and daily necessities due to healthcare costs, while 26% had to cut back on social activities and transportation.** Some even reported **delaying or avoiding necessary medical treatments**, with **16 out of 50 respondents (32%) admitting that they postponed healthcare visits due to financial constraints.** This delay in medical care could lead to worsening health conditions, increasing the risk of chronic diseases and complications that require even costlier treatments in the long

run. Moreover, the study found that **medicine costs constitute the most significant financial burden**, followed by diagnostic tests, hospitalization expenses, and consultation fees. **Only 46% of respondents found medicines to be affordable, while 44% struggled with their cost.** While many elderly individuals visit **private hospitals** for treatment due to perceived better quality services, this adds to their financial stress, as private healthcare is generally more expensive than government hospitals. **About 60% of respondents preferred private hospitals over government healthcare facilities, despite the higher costs, citing reasons such as shorter wait times and better medical attention.** Despite the preference for private healthcare, the lack of sufficient health insurance and awareness about free or subsidized medical programs continues to make healthcare unaffordable for many elderly individuals. Beyond the financial aspect, the study also analysed the **social and emotional challenges** faced by the elderly in maintaining their health. Many elderly individuals experience **loneliness, stress, and mental health issues**, particularly those living alone without adequate family support. **About 38% of respondents reported feeling socially isolated, and only 2% had access to mental health counselling or therapy.** Mental health services remain underutilized, with only **one respondent reporting access to mental health support**, suggesting significant gaps in psychological care for the elderly. Furthermore, mobility challenges, lack of transportation, and **inadequate home healthcare services** prevent many elderly individuals from seeking timely medical attention. **While 84% of respondents visit clinics or hospitals, only 12% receive home visits by healthcare professionals, indicating that in-home medical support is not widely available or accessible.** The findings indicate that elderly healthcare is not just an economic issue but a **multifaceted challenge** requiring a **comprehensive approach** that includes financial aid, policy improvements, increased awareness programs, better accessibility to healthcare facilities, and mental health support.

In conclusion, the study highlights the **urgent need for reforms** in elderly healthcare policies, including **expanding health insurance coverage**, increasing **awareness and accessibility of government healthcare schemes**, and implementing **financial assistance programs** to support elderly individuals with low incomes. The **cost of medicines and treatments should be subsidized**, and awareness campaigns should be launched to educate elderly individuals about the healthcare benefits they are entitled to receive. Moreover, **community-based healthcare initiatives** should be strengthened to provide **affordable and accessible medical care**, especially for those facing mobility constraints. **Developing home-based healthcare programs, telemedicine services, and community support groups could improve**

healthcare access for those who struggle with transportation or physical limitations. Addressing the **mental and emotional health** of the elderly is equally essential, requiring the establishment of **counselling services, social engagement programs, and mental health support systems** tailored for senior citizens. **Policymakers should focus on increasing the reach of government healthcare schemes, ensuring that at least 80% of the elderly population is aware of the available financial aid and healthcare programs, compared to the current 40% awareness level.** Governments, healthcare providers, and society must work together to ensure a **holistic and sustainable** healthcare framework that prioritizes **affordability, accessibility, and quality medical care** for the aging population. By taking these steps, we can significantly **enhance the well-being and dignity of elderly individuals**, allowing them to lead a healthier, more secure, and fulfilling life in their later years.

CHAPTER 6

PROPOSED SOLUTIONS

This chapter focuses on proposing solutions to improve elderly healthcare based on the findings of the study. It suggests measures to enhance healthcare accessibility, financial support, and awareness of government schemes. The recommendations aim to address the challenges faced by the elderly in managing medical expenses and ensuring better overall well-being.

1. Encouraging Affordable Home Healthcare Services

Issue: 78% of respondents are willing to consider a paid home healthcare support service if it reduces overall costs, but affordability remains a key concern.

Solutions:

- **Affordable Subscription Plans:** Introduce tiered pricing models (basic, standard, premium) to accommodate different income groups.
- **Government or NGO Collaboration:** Advocate for subsidies or funding to make home healthcare services more affordable.
- **Awareness Campaigns:** Educate people about the benefits of home healthcare to address trust issues and concerns about service quality.
- **Quality Assurance Measures:** Establish strict regulatory standards for home healthcare services to build consumer confidence.
- **Technological Integration:** Implement telemedicine and remote patient monitoring to enhance the efficiency of home healthcare services.

2. Making Healthcare Services More Economical

Issue: The majority consider ₹4,000 as the upper limit for affordable home healthcare, while demand significantly drops for costlier services.

Solutions:

- **Budget-Friendly Packages:** Design home healthcare services under ₹4,000 to appeal to the majority.
- **Flexible Payment Models:** Introduce instalment-based payments to ease financial burden.
- **Public-Private Partnerships:** Work with hospitals to provide subsidized home healthcare services.

- **Community-Based Health Plans:** Develop local healthcare cooperatives where members contribute and receive subsidized care.
- **Tax Incentives for Elderly Care:** Advocate for tax benefits on elderly healthcare spending.

3. Prioritizing Elderly Healthcare in Economic Policies

Issue: 94% of respondents believe elderly healthcare should be a government priority, indicating high public support.

Solutions:

- **Government Funding for Elderly Care:** Advocate for increased healthcare budgets, tax relief, and senior citizen-focused medical schemes.
- **Health Insurance Expansion:** Lobby for affordable, comprehensive insurance policies for the elderly.
- **Subsidized Medication Programs:** Propose price caps on essential medicines for senior citizens.
- **Expansion of Public Healthcare Facilities:** Strengthen government hospitals to provide free or low-cost healthcare for seniors.
- **Research & Development in Geriatric Care:** Increase funding for medical research focused on age-related diseases.

4. Enhancing the Economic Value of Healthcare Support Systems

Issue: 47% of respondents prioritize discounted medications and services, while others focus on emergency support and automated health monitoring.

Solutions:

- **Pharmaceutical Discounts & Bulk Buying Programs:** Partner with pharmacies to offer special senior citizen discounts.
- **Remote Monitoring Devices:** Encourage the use of affordable smart devices for preventive care.
- **Emergency Response Infrastructure:** Expand access to emergency medical support at reduced costs.
- **AI-Based Health Predictive Models:** Use AI to anticipate medical risks and provide early intervention.
- **Home-Based Diagnostic Services:** Develop affordable in-home lab testing options.

5. Improving Economic Benefits in Healthcare

Issue: Respondents are split between lower costs (32%), better value (33%), and improved accessibility (35%).

Solutions:

- **Flexible Insurance Plans:** Provide options that balance cost, coverage, and accessibility.
- **Technology-Driven Healthcare:** Expand telemedicine and AI-based diagnosis tools for cost-efficient care.
- **Transportation Support for the Elderly:** Implement subsidized medical transport programs to reduce travel costs.
- **Digital Health Records:** Improve accessibility and coordination of healthcare services by digitizing medical records.
- **Healthcare Financing Schemes:** Establish microfinance options for elderly individuals to manage medical expenses better.

6. Expanding Government and Community Support

Issue: 60% of respondents are unaware of government programs for elderly healthcare.

Solutions:

- **Awareness Drives:** Organize workshops and outreach programs to educate elders about available schemes.
- **Simplified Enrollment Procedures:** Make government assistance programs more accessible with easy documentation.
- **Community-Based Health Funds:** Encourage local financial aid initiatives for elderly healthcare.
- **Incentivized Volunteer Caregiver Programs:** Train and deploy community caregivers with financial incentives.
- **Elderly Healthcare Helplines:** Establish 24/7 support services to provide information and emergency assistance.

7. Addressing High Out-of-Pocket Healthcare Costs

Issue: High medicine costs (42%) and diagnostic expenses (22%) are the biggest financial burdens.

Solutions:

- **Subsidized Healthcare Services:** Work with policymakers to reduce out-of-pocket medical expenses.

- **Free or Low-Cost Health Check-ups:** Encourage hospitals to provide annual check-ups for senior citizens.
- **Expansion of Generic Drug Usage:** Promote the use of cost-effective, high-quality generic medicines.
- **Transparent Pricing for Medical Services:** Require hospitals and clinics to disclose service costs upfront.
- **Assistance Programs for Low-Income Seniors:** Develop targeted financial aid for seniors who cannot afford medical expenses.

8. Encouraging Preventive Healthcare

Issue: Many respondents seek specialist consultations (17 people), but preventive care is underutilized.

Solutions:

- **Community Health Camps:** Conduct free regular screenings for chronic diseases.
- **Lifestyle-Based Wellness Programs:** Promote exercise, diet awareness, and regular medical check-ups.
- **Senior Citizen Clinics:** Establish dedicated clinics offering low-cost healthcare services.
- **Holistic Healthcare Approach:** Integrate mental health, physiotherapy, and nutrition counselling into elderly healthcare services.
- **Incentivized Preventive Care:** Offer discounts or rewards for regular check-ups and healthy lifestyle habits.

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Social Innovation and Does the World Revolve around Economics

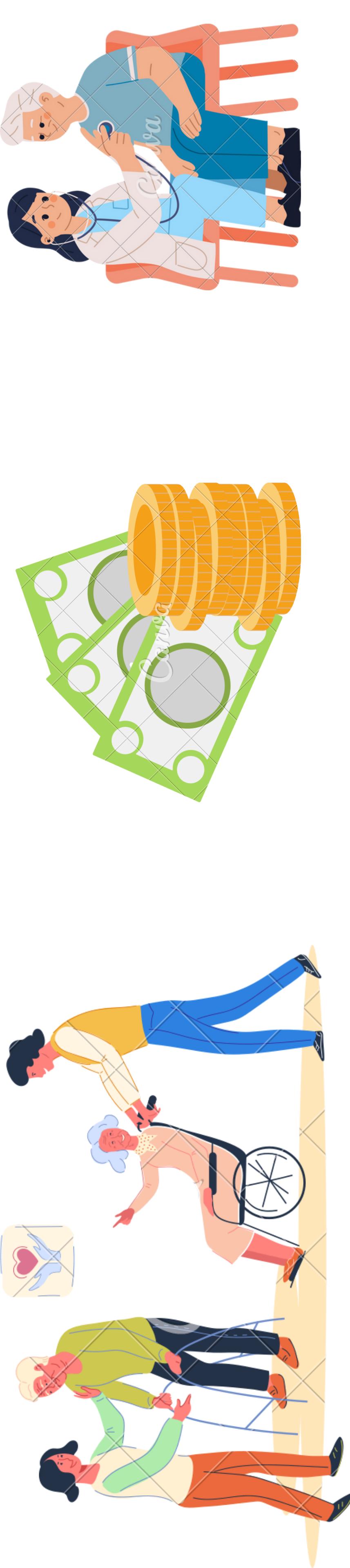


Major Project

**Design Your Degree
Semester-3**

Group Members: Diya Rani, Neamat Kour, Sarnish Kour,
Suhani Behl & Vidhita Arora

"Integrating Economics and Social Innovation in Elderly Healthcare: A New Approach to Aging Well"



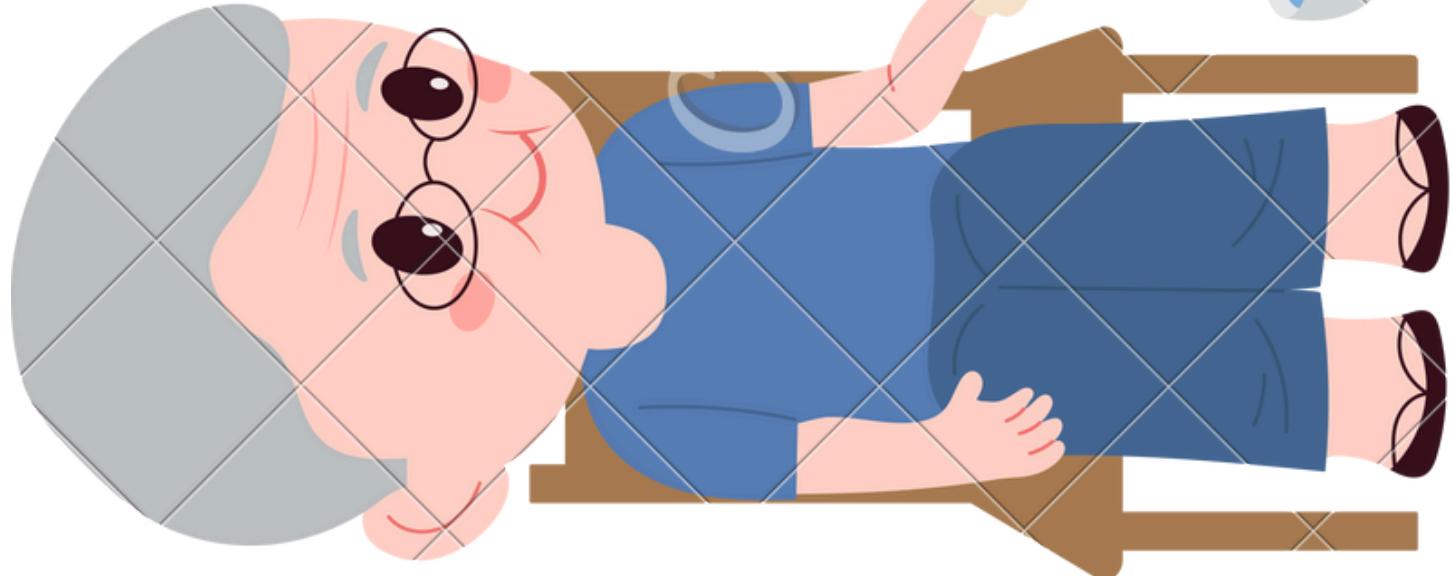
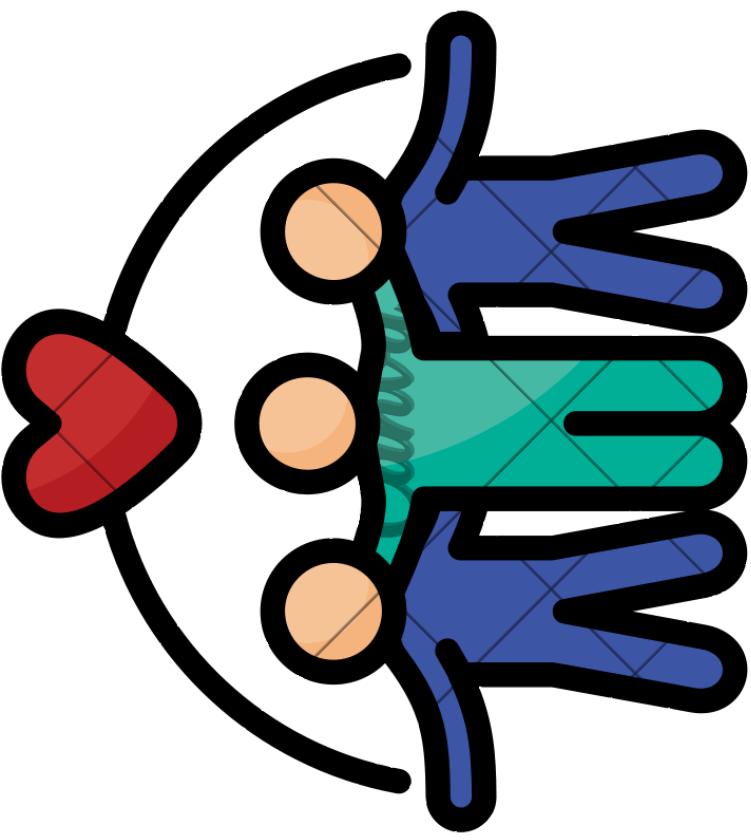
Objective

To design, implement and assess a healthcare support system for elderly individuals living alone, addressing both physical and mental well-being while analyzing the economic impact of healthcare on their lives.



What is Elderly Care?

Elderly Care is the service and support designed to meet the physical, emotional, and social needs of older adults. This includes medical care, assistance with daily activities, social support, and household management.



Why Elderly Care is Important

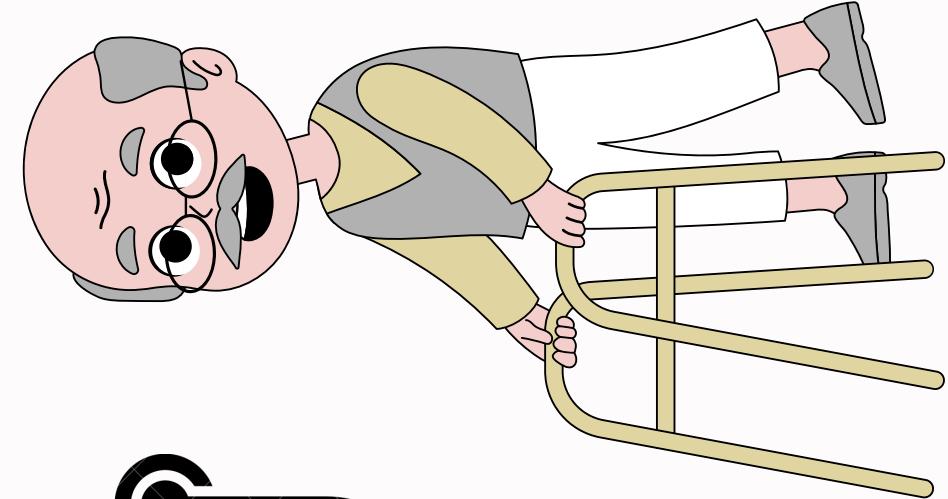
1. **Health Issues** – Chronic diseases, mobility problems and need for regular medical care.
2. **Financial Struggles** – High medical expenses, limited pensions, and lack of insurance.
3. **Loneliness & Emotional Challenges** – Many elderly live alone with little social support.
4. **Lack of Accessibility** – Difficulty reaching hospitals, transportation issues, and lack of awareness of healthcare schemes.



Research Method

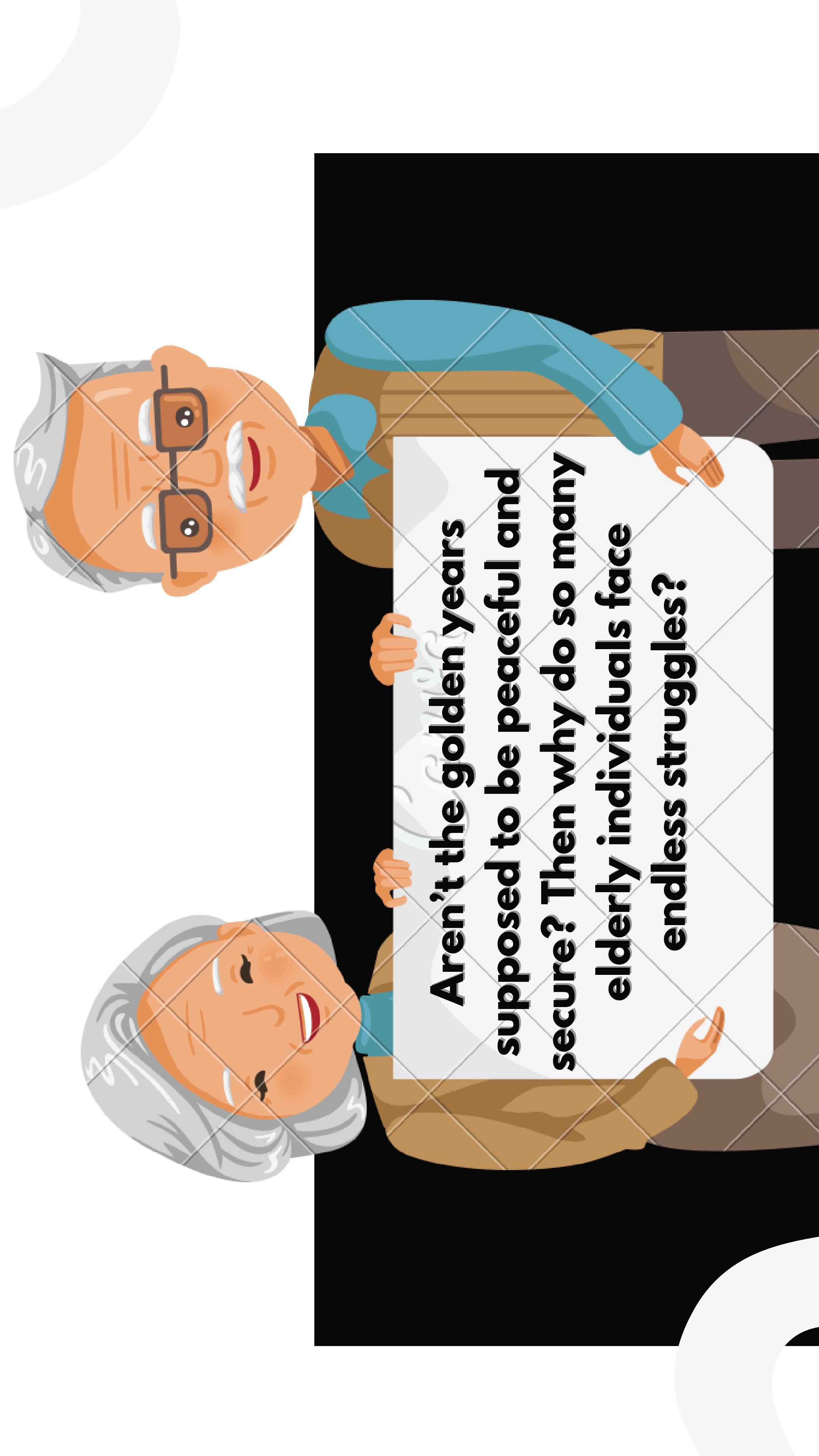


1. Direct Interactions – Personally met elderly individuals to understand their struggles.
2. Surveys & Conversations – Gathered data on their financial & medical needs.
3. Field Observations – Identified key areas where support is needed.





ARE WE
FAILING
OUR
COUNTRY?

An illustration of two elderly individuals, a man and a woman, holding a large white sign. The man, on the left, has grey hair and is wearing glasses. The woman, on the right, has short grey hair. They are both smiling and looking towards the camera. The sign they are holding has a black border and contains the following text:

**Aren't the golden years
supposed to be peaceful and
secure? Then why do so many
elderly individuals face
endless struggles?**

KEY ISSUES FACED BY ELDERLY

Struggling to Make Ends Meet

Skyrocketing medical bills, inadequate pensions, and minimal government aid leave them financially stranded.

Healthcare or a Distant Dream?

Expensive treatments, transportation issues, and difficulty accessing doctors make healthcare a major challenge.

Lonely, Forgotten, and Stressed

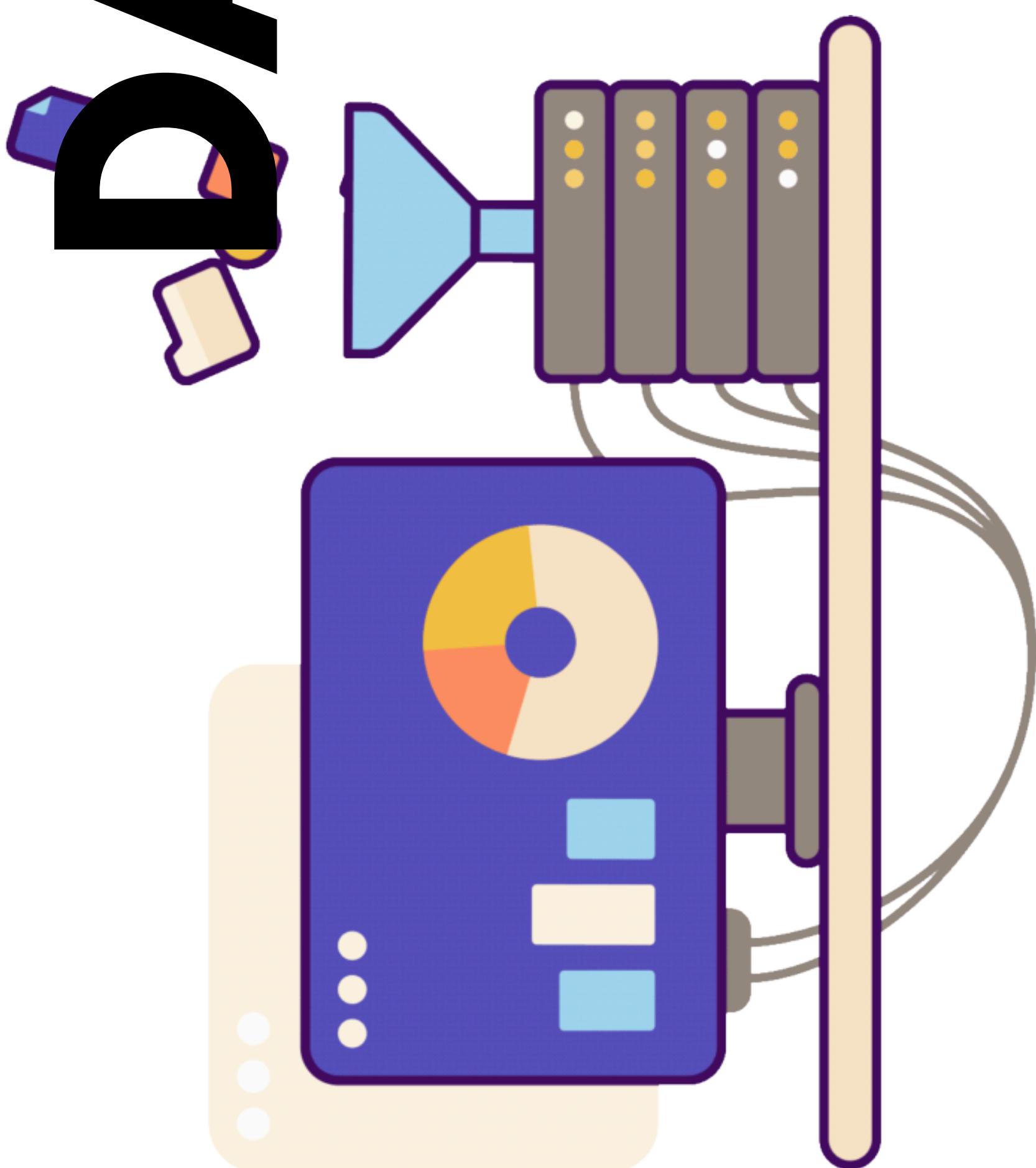
Lack of family support, isolation, and depression take a toll on their mental and emotional well-being.

Unaware and Unprotected

Many elderly individuals don't even know about the government schemes meant to help them.



DATA



Financial Struggles

A significant portion of the elderly population in India lacks access to essential daily medications. Specifically, 9.5% of rural and 4.2% of urban elderly individuals report this issue.

Healthcare Access in Rural Communities in India



The screenshot shows a book page from the National Library of Medicine's website. The title is 'Aging in Asia: Findings From New and Emerging Data Initiatives.' by Subrojit Dey, Devaki Namibiar, J. K. Lakshmi, Kabir Sheikh, and K. Srinath Reddy. It includes links for 'Books', 'Browse Titles', 'Advanced', 'Show details', 'Hardcopy Version at National Academies Press', and a search bar. The NIH logo is visible at the bottom.



Healthcare Access Problems

In rural India, there is a severe shortage of healthcare services, with limited public spending and a significant healthcare personnel deficit, making access to medical care challenging for the elderly.

15 Health of the Elderly in India: Challenges of Access and Affordability

Subrojit Dey, Devaki Namibiar, J. K. Lakshmi, Kabir Sheikh, and K. Srinath Reddy.

India, the world's second most populous country, has experienced a dramatic demographic transition in the past 50 years, entailing almost a tripling of the population over the age of 60 years (i.e., the elderly) (Government of India, 2011). This pattern is poised to continue. It is projected that the proportion of Indians aged 60 and older will rise from 7.5% in 2010 to 11.1% in 2025 (United Nations Department of Economic and Social Affairs [UNDESA], 2008). This is a small percentage point increase, but a remarkable figure in absolute terms. According to UNDESA data on projected age structure of the population (2008), India had more than 91.6 million elderly in 2010 with an annual addition of 2.5 million elderly between 2005 and 2010. The number of elderly in India is projected to reach 158.7 million in 2025 (United Nations Department of Economic and Social Affairs, 2008), and is expected, by 2050, to surpass the population of children below 14 years (Raju, 2006).

Mental & Emotional Challenges

Approximately 20% of the elderly in India suffer from mental health issues, with 1 in 3 individuals over 60 reporting depressive symptoms.



Awareness Gaps

A considerable number of elderly individuals are unaware of existing social security schemes, leading to underutilization of available benefits.



**Aging should be about comfort,
not constant battles. Are we
doing enough to support them?
It's time to act!**



Questions

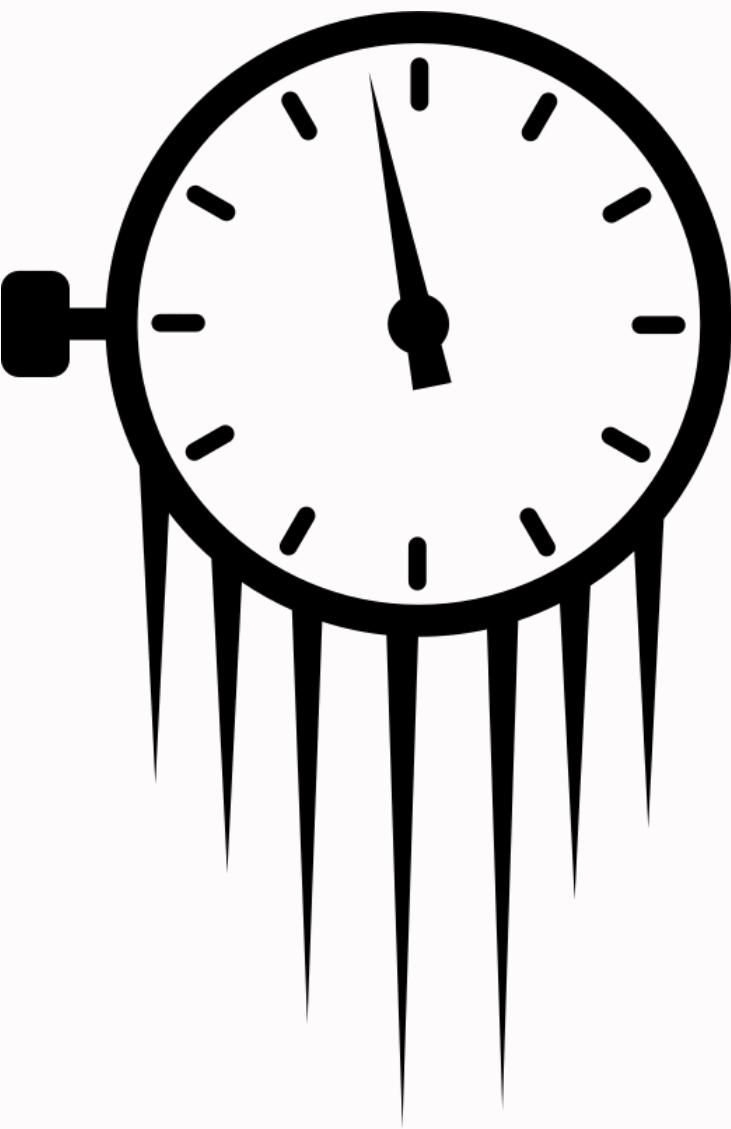
How many of you know the feeling of being lonely?

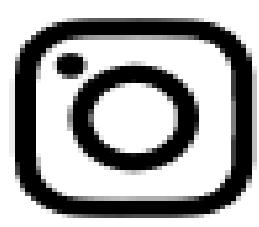


Do you want your parents or grandparents to feel
neglected when they need support the most?



How many of us can truly say we spend the maximum time with the elders daily in our homes?





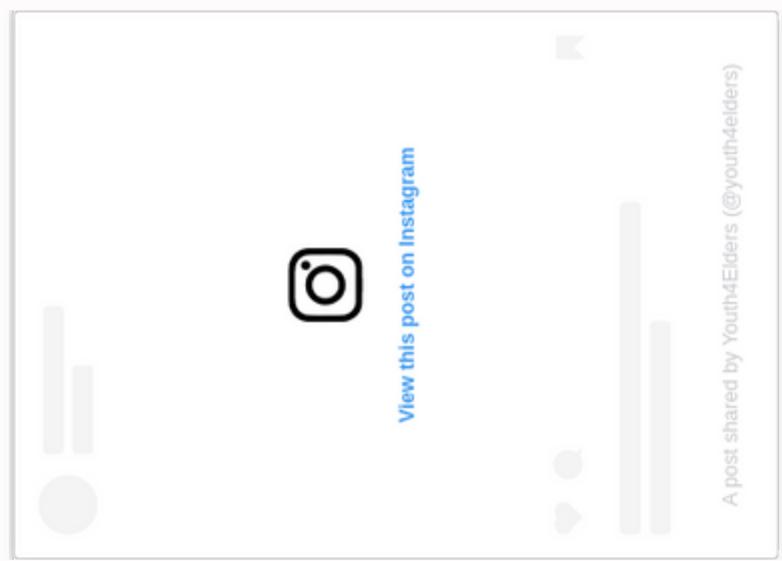
[View this post on Instagram](#)

YOUTH4ELDERS



This is exactly why we started Youth4Elders to bridge this gap, bring companionship, and ensure our elders never feel alone.

What is Youth4Elders?



Our Mission

- To create a society where no elder feels lonely.
- To encourage the youth to actively take part in social responsibility.
- To redefine elder care by providing companionship rather than just assistance.

Why Youth4Elders

- Personalized Attention – Each elder is assigned one or more volunteers.
- No Cost to Elders – Purely driven by compassion & social responsibility.
- Emotional & Social Benefits – Creates a bond that enriches both the elder and the volunteer.
- Flexible & Scalable Model – Can be implemented in various locations with ease.

<https://www.instagram.com/reel/DFUspHIP80D/?igsh=MWtlajZ6b3Q5b2szzaA==>



Volunteer Engagement & Participation

- Our Volunteers Are Truly Engaged
- They respond actively to our messages.
- They participate regularly in elder care activities.
- They update us on their daily visits.

I am grateful for the opportunity to help my elder, Vijay Uncle, in improving his living conditions. Seeing his challenges, I took the initiative to support him by assisting with daily tasks, improving his comfort at home, or spending meaningful time with him. His happiness and appreciation made me realize how important it is for us to care for our elders.

This experience has inspired me to take a broader initiative—encouraging young people to build stronger relationships with elders. By listening to their wisdom, offering companionship, and assisting them in their needs, we can create a more compassionate and connected society.

Let's bridge the gap between generations with kindness and respect. Every small effort counts!

I just had a delightful conversation with Jinder Kour Ji, and she seemed truly joyful. Her warmth and cheerfulness made our interaction even more special. Moments like these highlight the beauty of meaningful connections.

I'm grateful to be a part of this lovely initiative.
#Youth4Elders

Today I visited again to Mr Madan Lal he was very happy then before. His health was also improving . Am also very happy that I spent my time with him.

She is truly an angel! Visiting and spending time with Iqbal Kour, who lives alone, is such a selfless act of kindness. My compassion and care brought joy to her.

Rehat kour 

2:02 pm

Swaran Kanta was eagerly waiting to share her day with me, and the way her face lit up as she spoke melted my heart. She had so much warmth and wisdom to offer, making me realize how small gestures can bring immense joy.

Simran
2:17 pm

Spending time with Mr. Kulbhushan Lal was a heartwarming experience. His stories, wisdom, and laughter made every moment special. It's incredible how a simple visit can bring so much joy and connection. Grateful for the opportunity to share kindness.

Gratefully,

Our Social Media

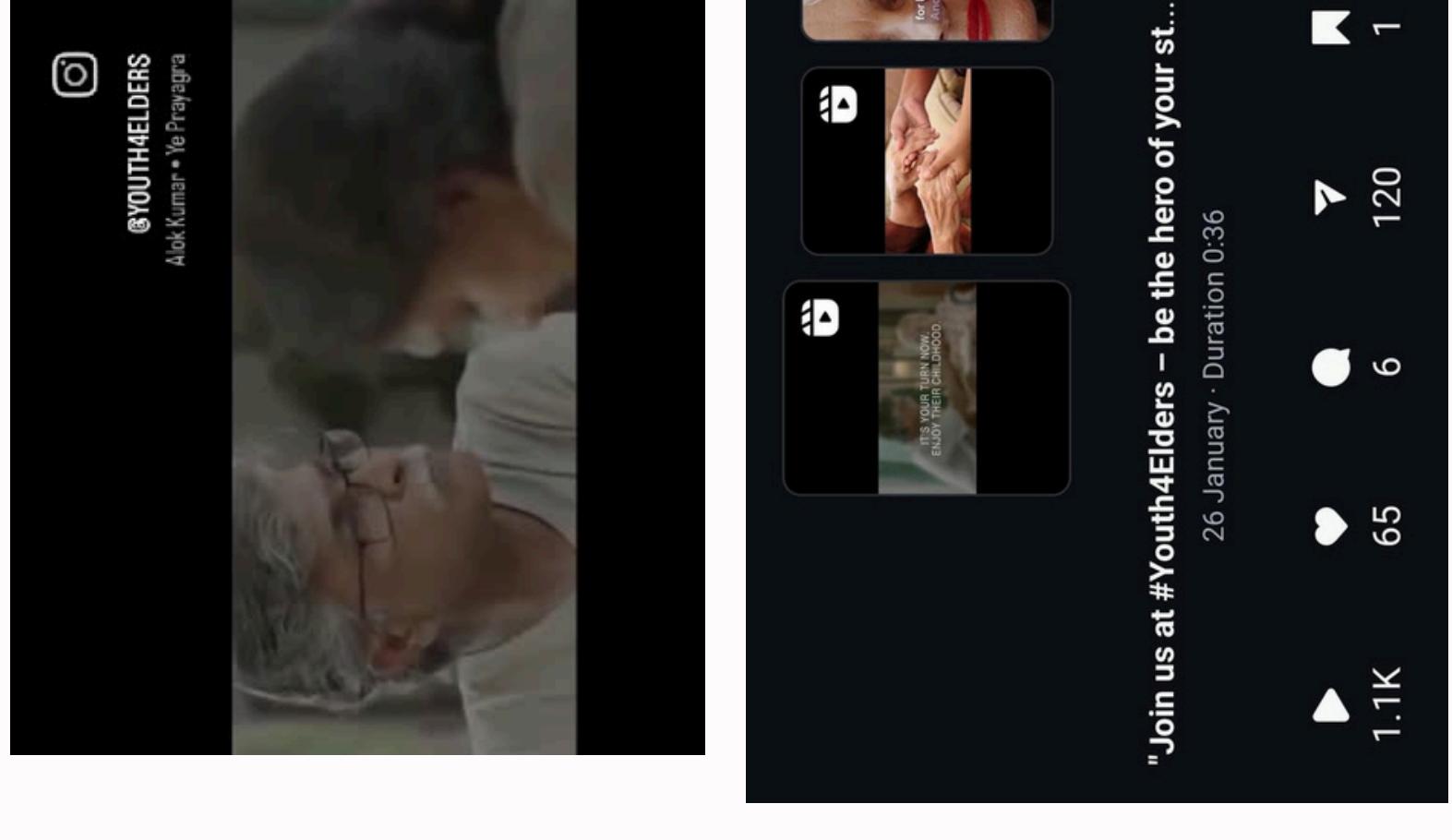
The image shows a mobile application interface for "youth4elders". At the top left is a navigation bar with icons for home, profile, and more. Below it is a header with the app's logo and a search bar. A central navigation bar has buttons for "Edit profile", "Share profile", and "Contact".

The main content area features several user profiles arranged in a grid:

- Sarah**: Shows a photo of a woman, a yellow hand icon, and the text "VOLUNTEERS OF YOUTH4ELDERS WE THANK YOU ALL!".
- Tina**: Shows a photo of a woman, a yellow hand icon, and the text "VOLUNTEERS OF YOUTH4ELDERS WE THANK YOU ALL!".
- Jill**: Shows a photo of a woman, a yellow hand icon, and the text "VOLUNTEERS OF YOUTH4ELDERS WE THANK YOU ALL!".
- Lynn**: Shows a photo of a woman, a yellow hand icon, and the text "VOLUNTEERS OF YOUTH4ELDERS WE THANK YOU ALL!".
- Sofia**: Shows a photo of a woman, a yellow hand icon, and the text "VOLUNTEERS OF YOUTH4ELDERS WE THANK YOU ALL!".

On the right side of the screen, there are large circular icons for "Edit profile", "Share profile", and "Contact".

At the bottom, there is a footer with icons for a house, a person, a gear, and a plus sign.



2 hr 1 min 33 sec

Watch time



Facebook

1,702

Accounts reached



Impressions
5,215

Reached audience ⓘ

Reached audience ⓘ

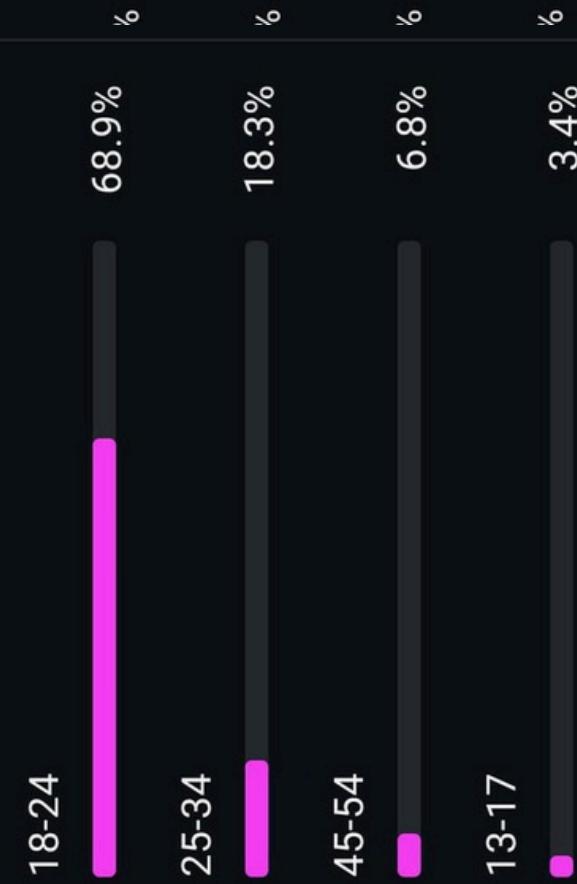
Reached audience ⓘ

Reached audience ⓘ

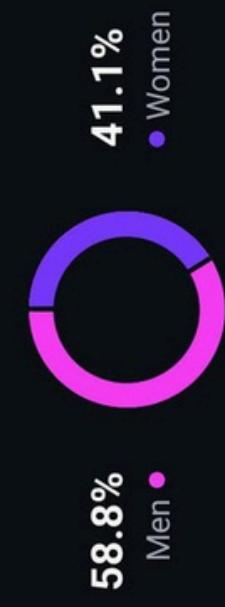
Top towns/cities

Jammu	48.2%
Delhi	9.1%
Gurugram	2.2%
Ahmedabad	2.2%

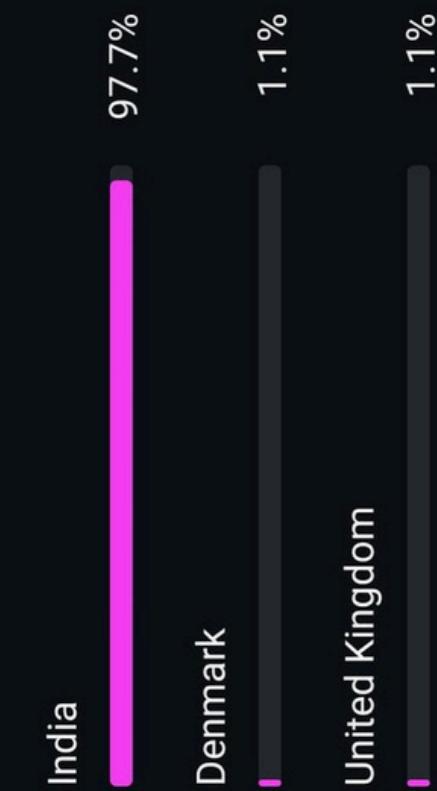
Top age ranges



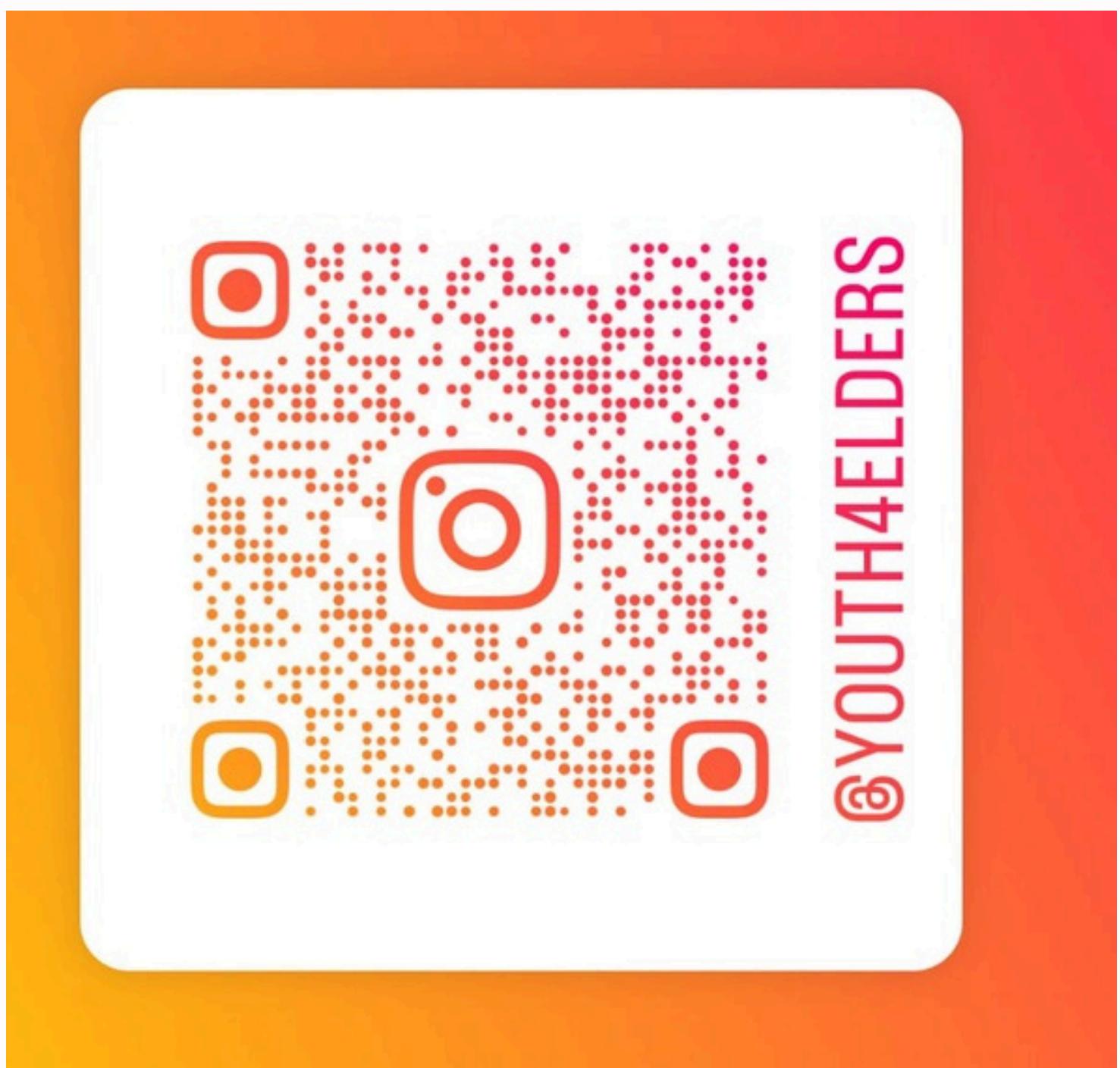
Gender



Top countries



JOIN US NOW !!! IT'S NEVER TOO LATE



Total Number of Volunteers – 19 (actively engaged)

- Elders We Support – 19

- Where Are We Active?

1. Ambphalla

2. Paloura

3. Janipur

4. Bakshinagar

5. AjitNagar

6. Guru Nanak Nagar

7. Barnai

8. Talab Tillo

9. Mohalla Paharian

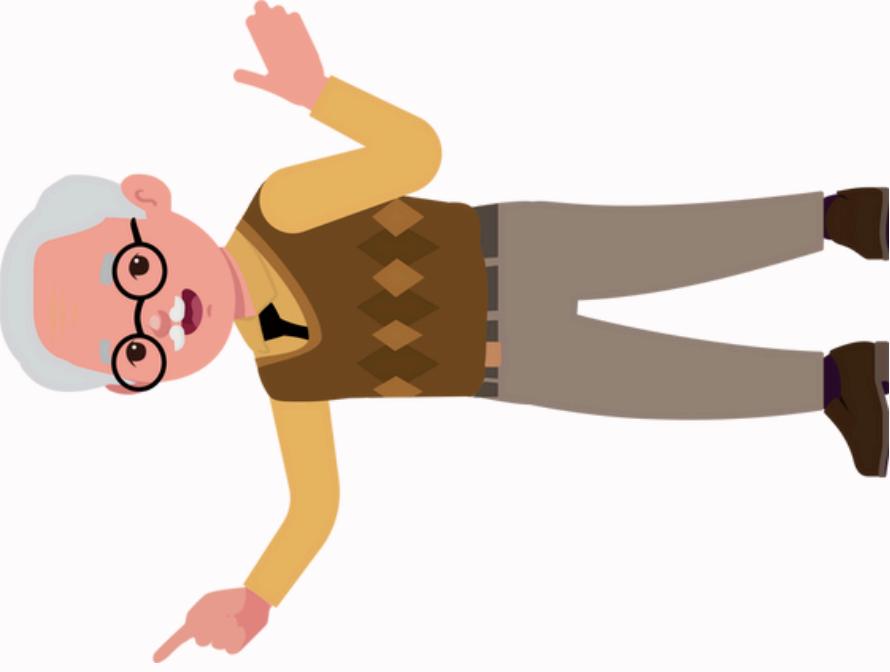
10. Kunjwani



Registration Link

Scan the QR Code to register & be a part of the movement.
Every small effort makes a big difference in an elder's life.

**"ONE DAY, WE WILL ALL GROW OLD. LET'S
CREATE A WORLD WHERE NO ELDER FEELS
FORGOTTEN."**



Implementation & Challenges

1. Recruiting Volunteers: -

- Using social media, partners from universities, bringing friend & families etc. together.
- Elderly were initially hesitant due to concerns about safety, reliability and volunteers' true intentions.
- To build trust, volunteers maintain true consistent visits, ensure transparency in their actions.

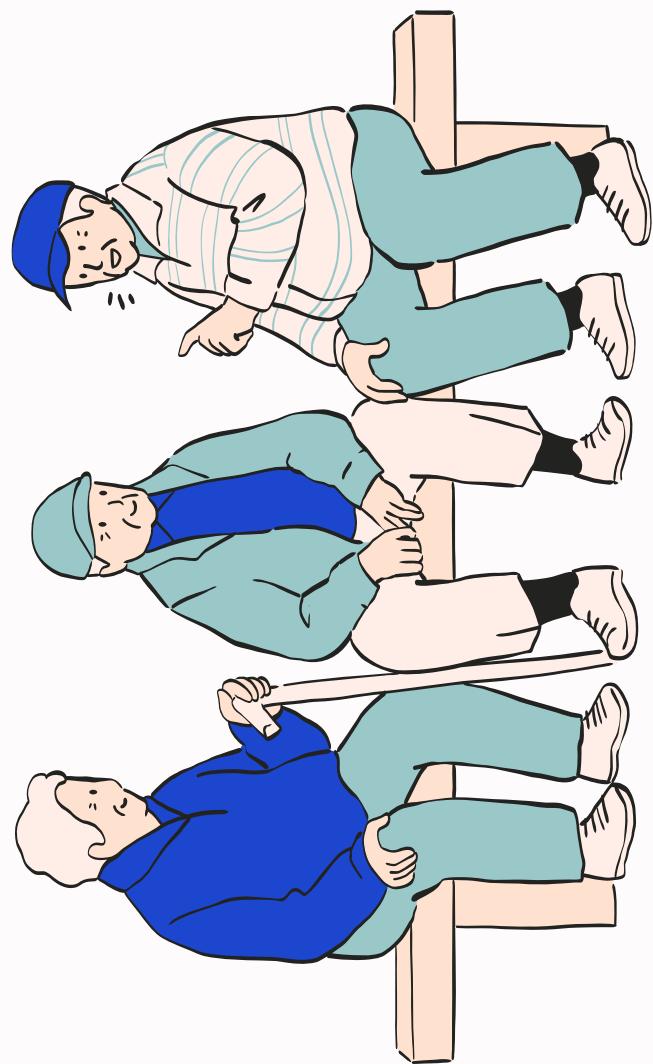
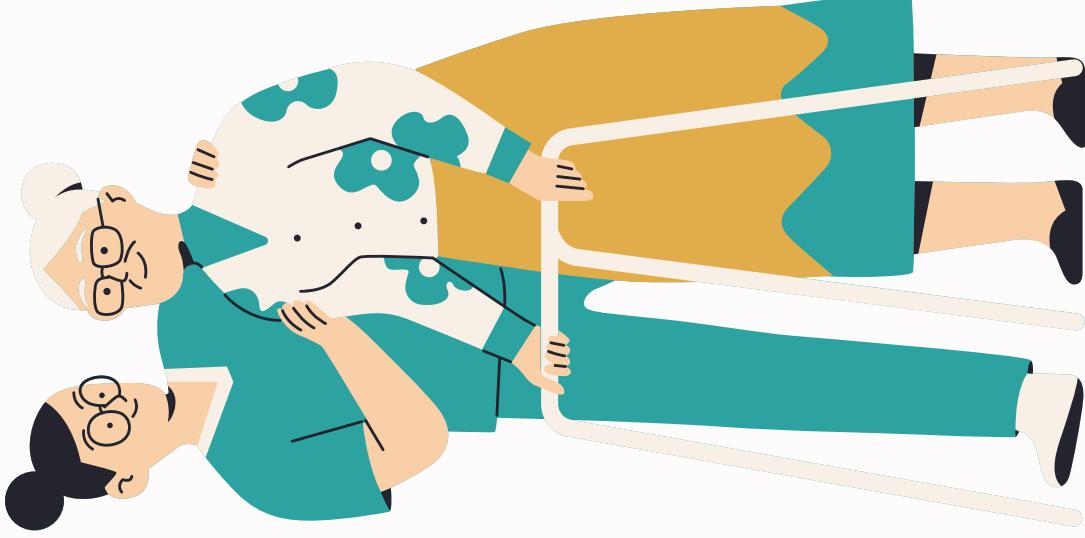
2. Managing responsibilities: -

- Effective management of volunteers ensures long-term commitment and impact.
- Providing a strong support system through regular check-ins and mentorship helps maintain motivation and efficiency.



3. Overcoming Difficulties:-

- Unexpected challenges, such as medical emergencies, are addressed through first aid training and collaboration with healthcare provider.
- To manage emotional stress, both volunteers and elders receive counseling support and stress management guidance.
- Overcoming family reluctance involves clear communication, sharing success stories etc.



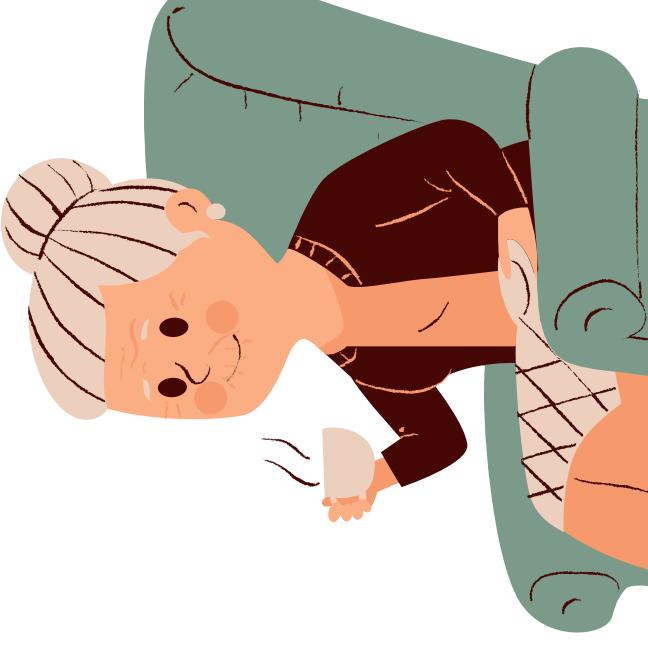
Impact & Real-Life Stories

- Many elderly individuals experience a significant improvement in emotional well-being when they feel valued and connected. Simple social interactions—whether through community programs or volunteer visits—help them feel less isolated and more engaged.
- Volunteers also gain immense personal growth, forming deep bonds and learning valuable life lessons from seniors. They describe the experience as transformative, filled with empathy, wisdom, and a newfound appreciation for life.

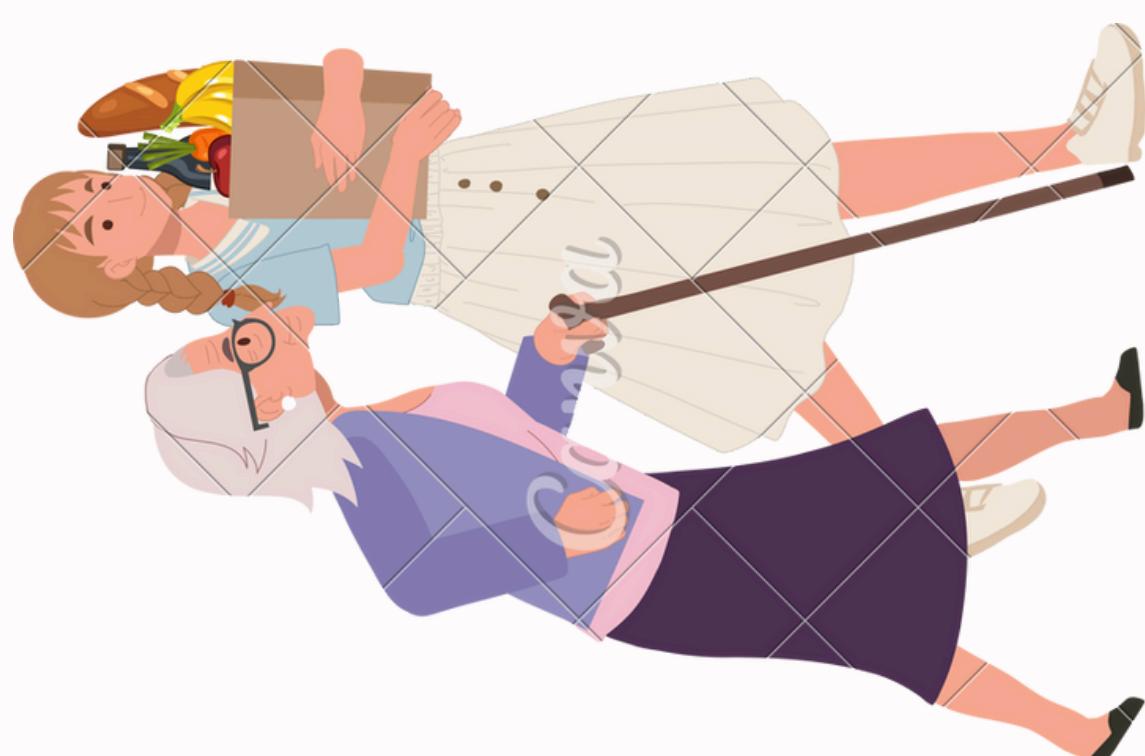
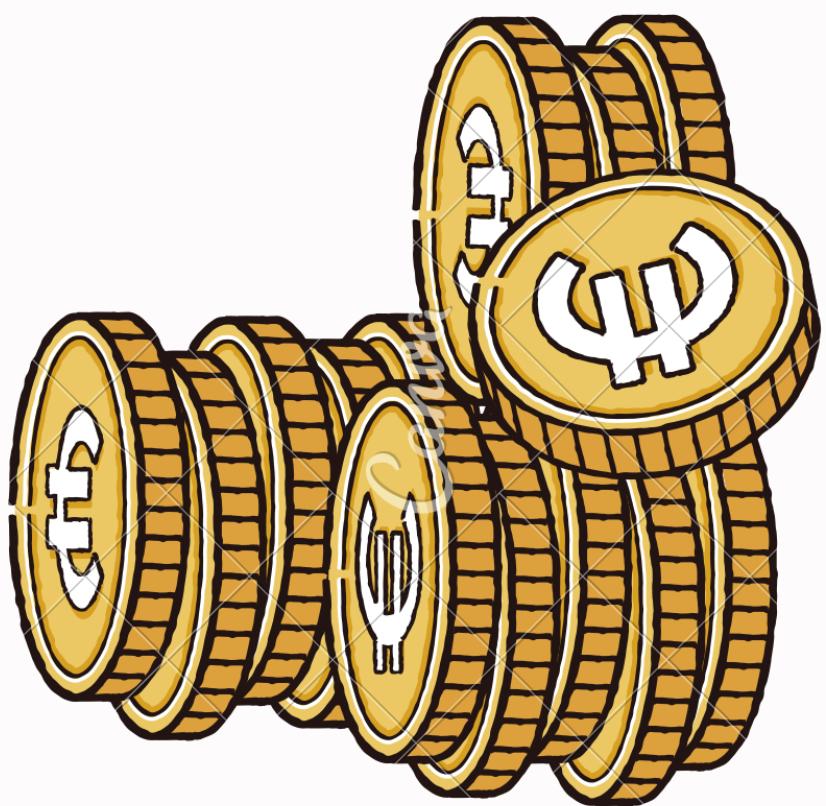
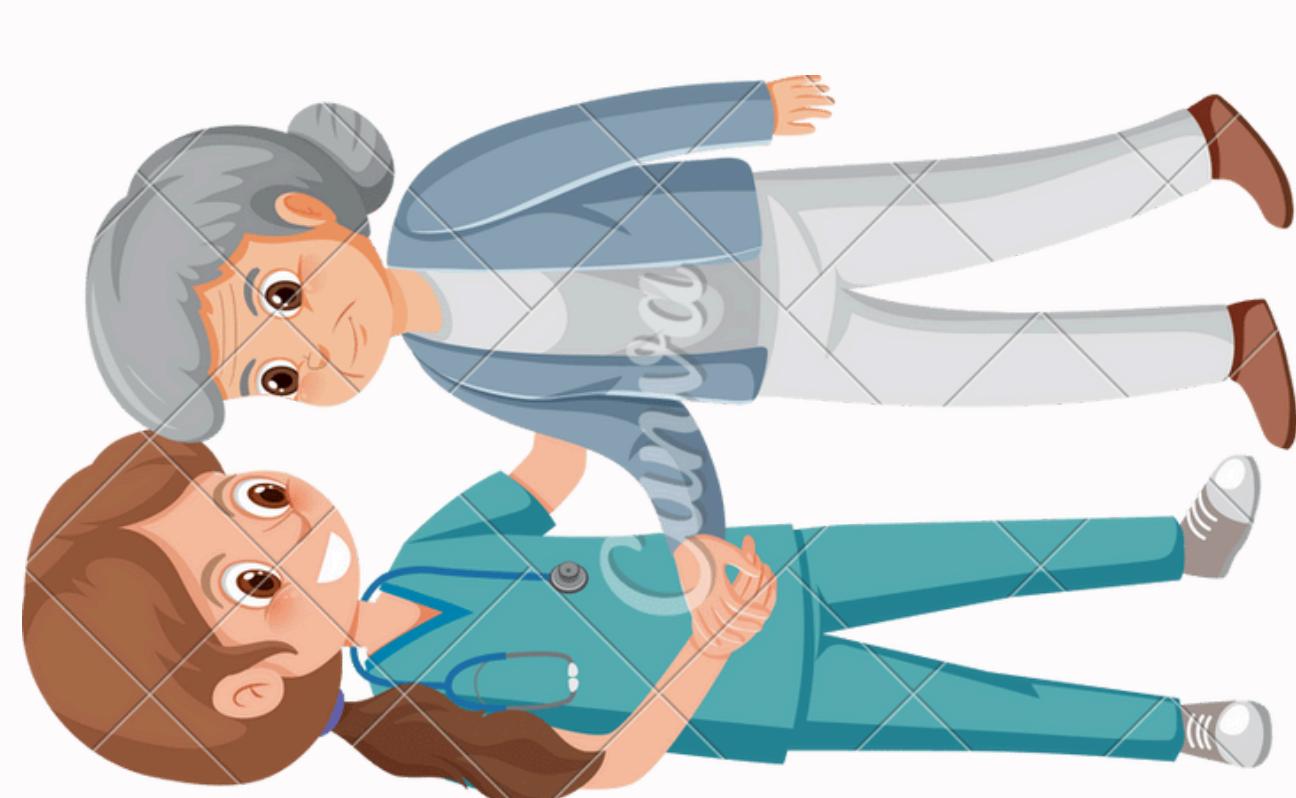
“Since joining, I feel less lonely and more happy!” – Mrs.Jinder ,

“Helping seniors has given me a new perspective on life.” – Mr.Gurmeet [Volunteer]

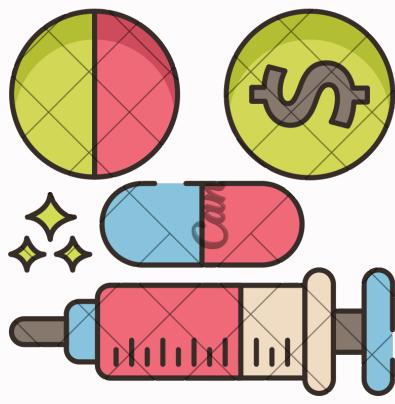
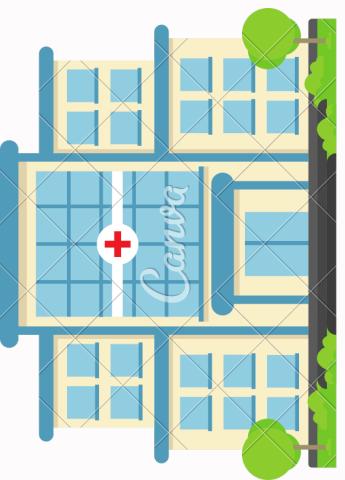
Caring for the elderly is not just about providing help; it’s about building meaningful connections that enrich both their lives and ours.



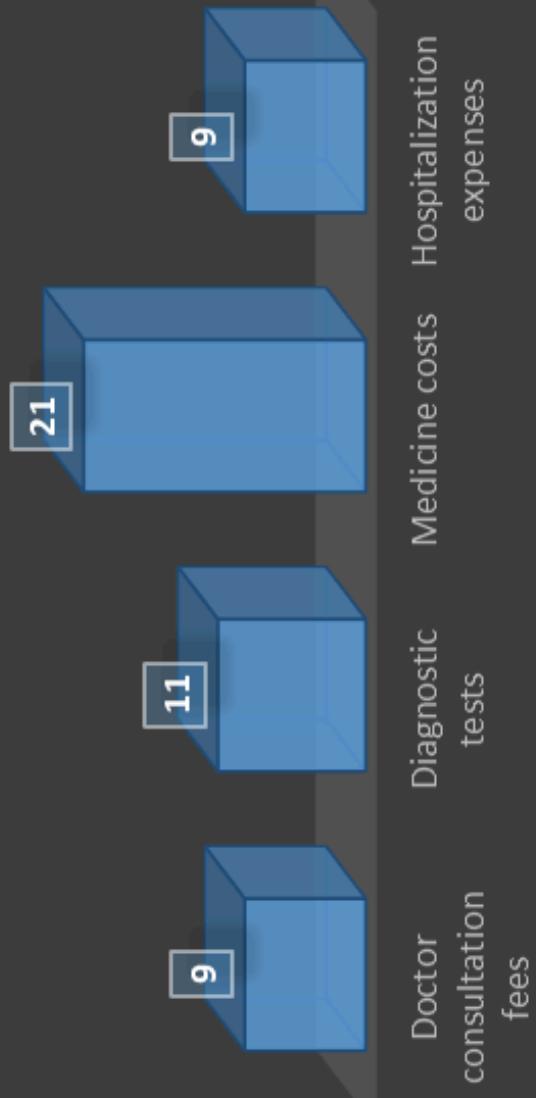
ECONOMICS



Economic Burden of Elderly Healthcare



WHAT IS THE MOST SIGNIFICANT FINANCIAL BURDEN RELATED TO HEALTHCARE?

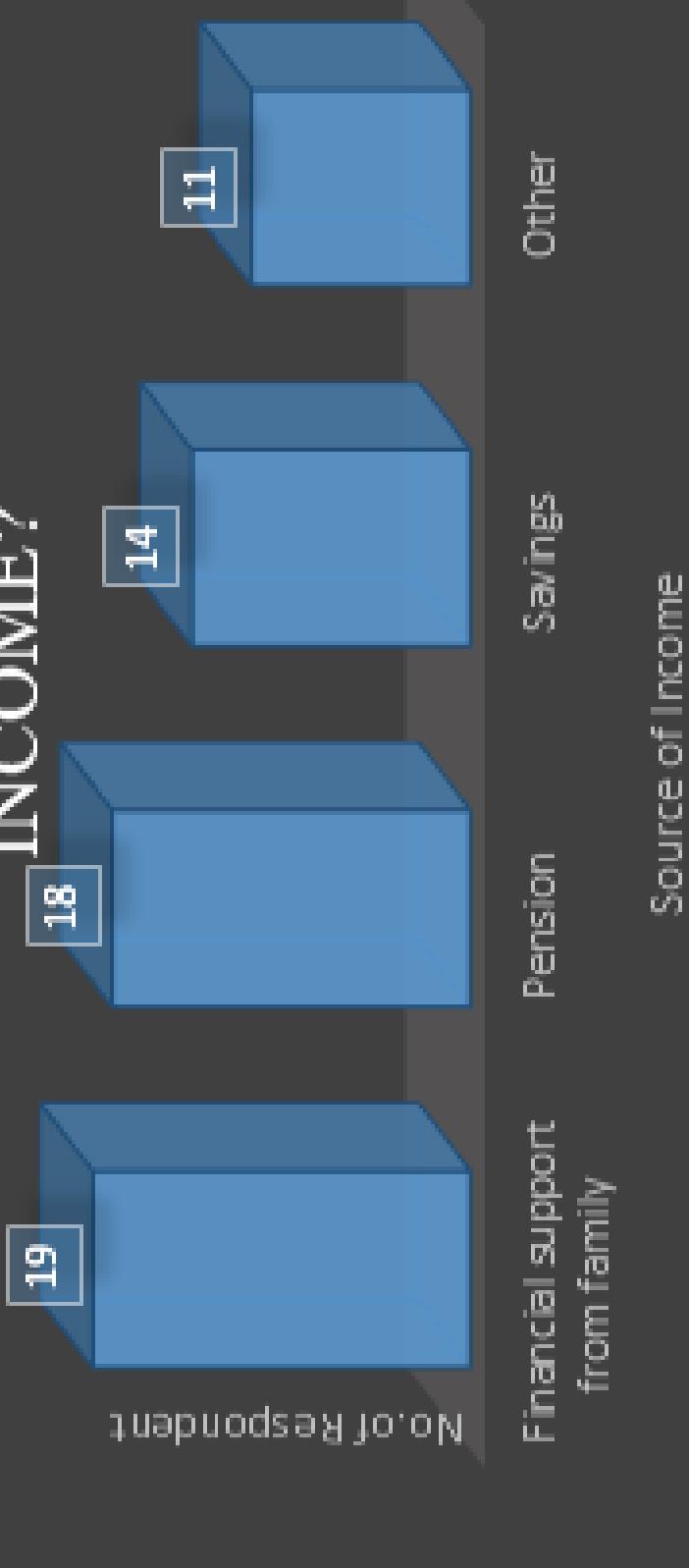


Source: Field Survey

- 📌 **Limited Financial Support**
Many elderly rely on pensions, family support, or savings, which are often not enough.



WHAT IS THE MAIN SOURCE OF INCOME?



Source: Field Survey

Solutions



✓ Expand Subsidized Healthcare Services

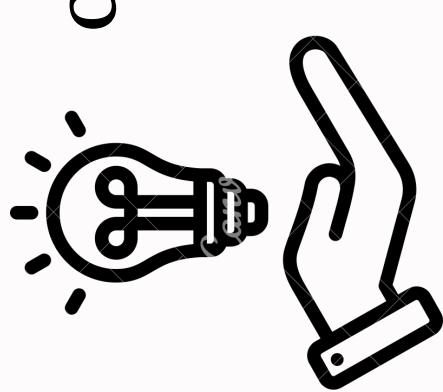
Increase affordable government healthcare programs for elderly individuals.

Provide free or low-cost medical check-ups at community clinics

✓ Advocate for Price Caps on Essential Medicines

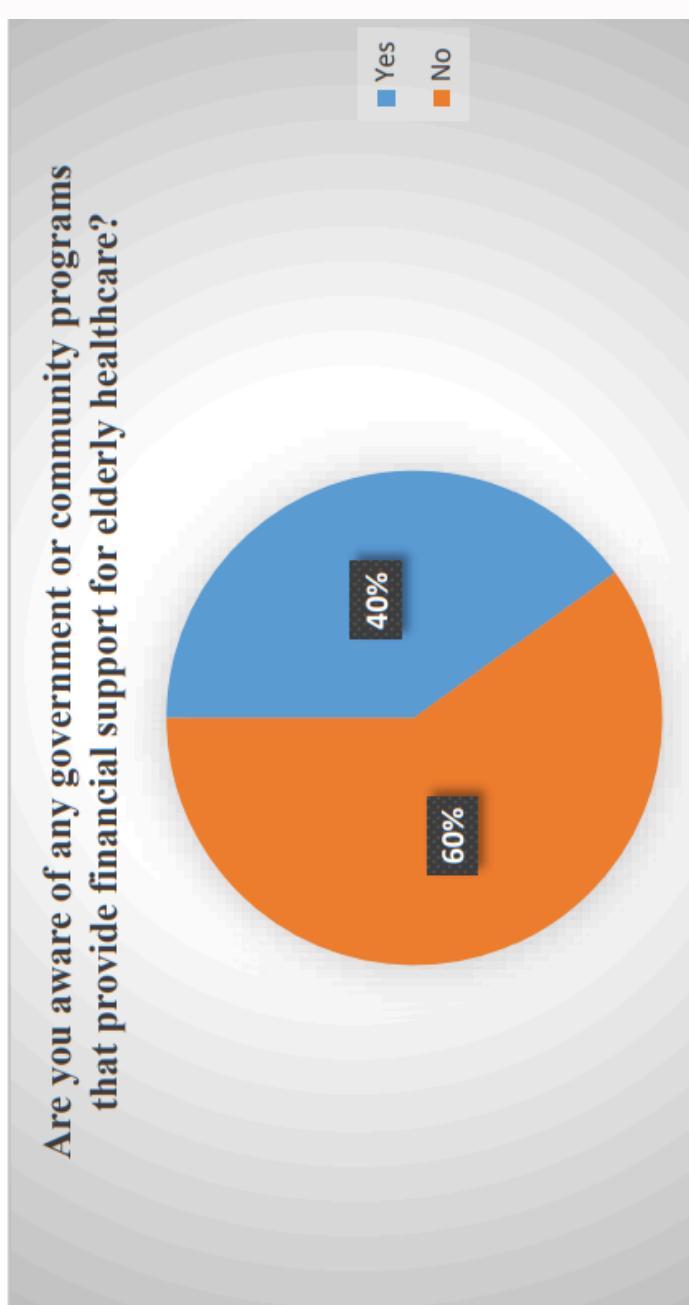
Work with policymakers to reduce the cost of life-saving medicines.

Introduce financial assistance programs for elderly patients with chronic conditions.



Awareness and Utilisation of Government Schemes

60% of respondents are unaware of government support programs.



Source: Field Survey

Only 14% successfully accessed government healthcare assistance.

Source: Field Survey

Receive any government assistance for healthcare	No. of elders
Yes	7
No	43

Source: Field Survey

Complicated enrollment processes deter elderly individuals.

SOLUTIONS

Conduct awareness campaigns on government healthcare schemes.



Simplify the application process for financial aid.

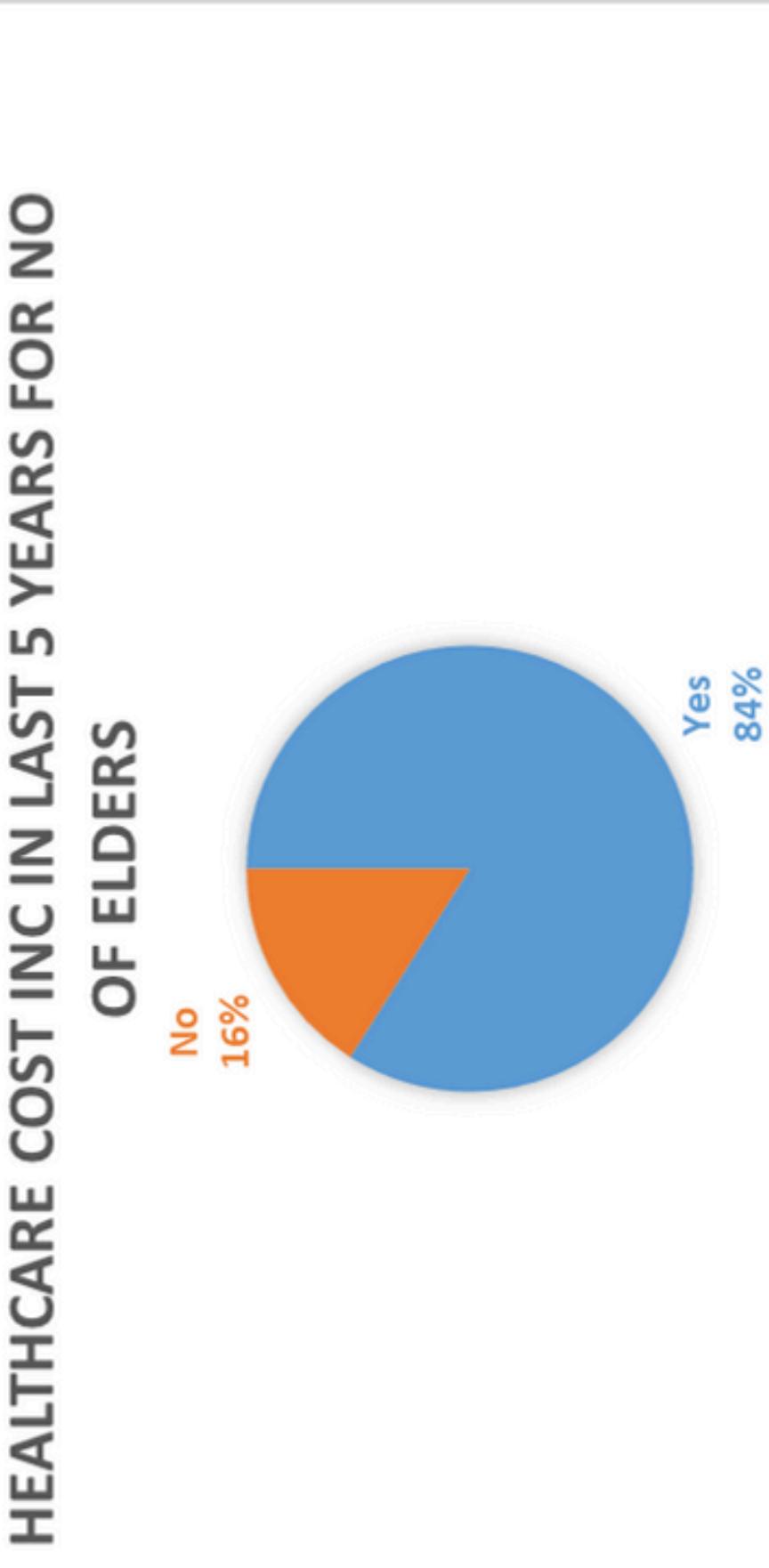


Develop elderly-specific healthcare helplines.

REGULAR MEDICATION & RISING HEALTHCARE COSTS

- **Increased Dependence on Medications:** 32 elderly individuals reported taking regular medication, indicating a significant dependency on pharmaceuticals for chronic conditions and age-related health issues.
- **Rising Healthcare (Medicines) Expenses:** 42 out of 50 respondents stated that their healthcare costs have increased over the past five years, highlighting a growing financial strain.

Take Regular Med	no of elders
Yes	32
No	18



Solutions: -

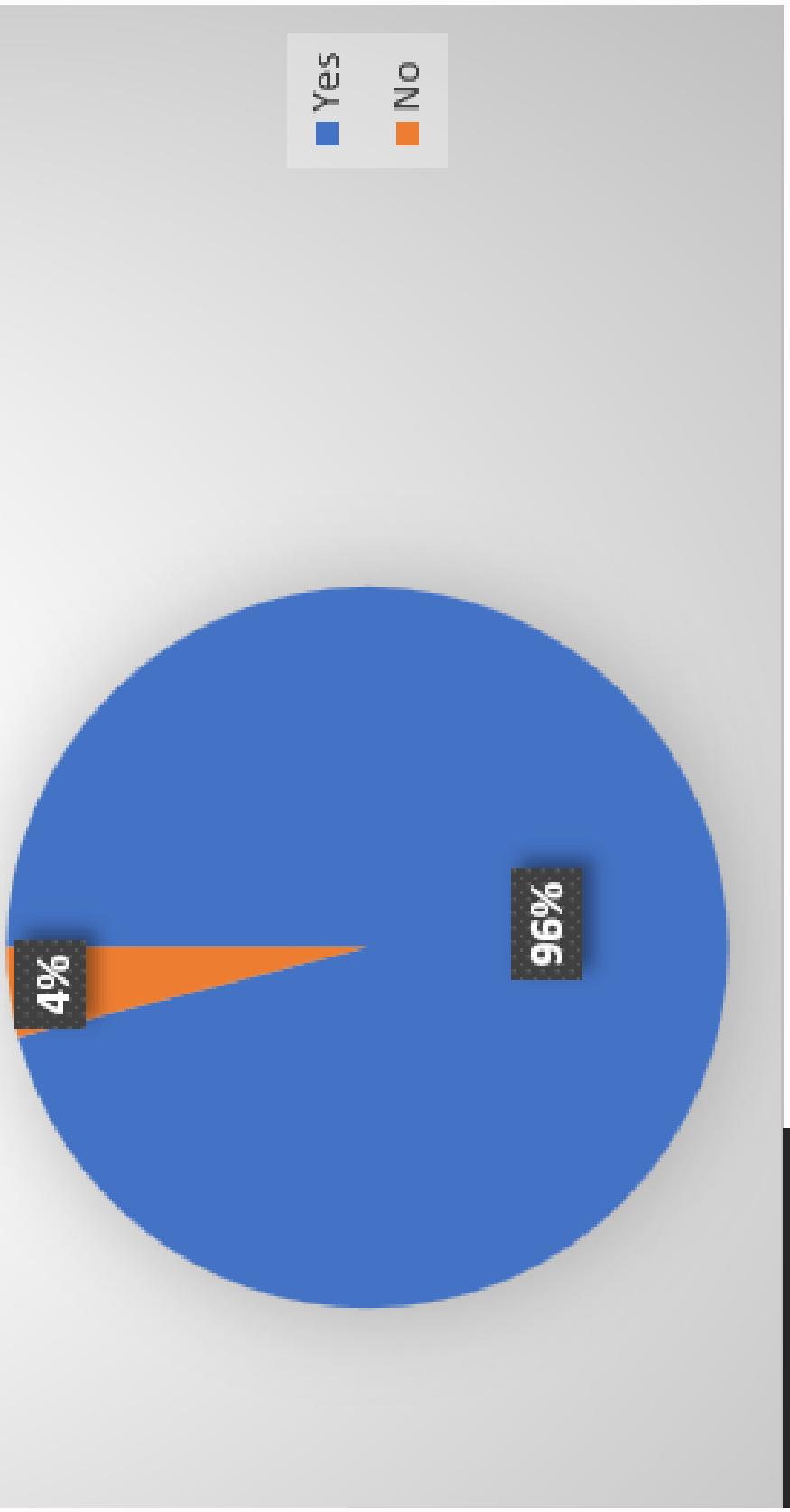
✓ More Government Support for Healthcare

- Provide free or low-cost health check-ups at local clinics.
 - Increase financial help for elderly healthcare.
- ### ✓ Lower the Cost of Medicines
- Work with policymakers to reduce medicine prices.
 - Offer financial support programs for elderly people with long-term medical needs.



Economic policy for elderly healthcare:

Do you believe economic policies should prioritize elderly healthcare funding?



- 96% support making elderly healthcare a government priority, yet policies remain inadequate.
- Lack of dedicated funding limits access to specialized senior care.
- Current policies fail to address elderly-specific healthcare needs.

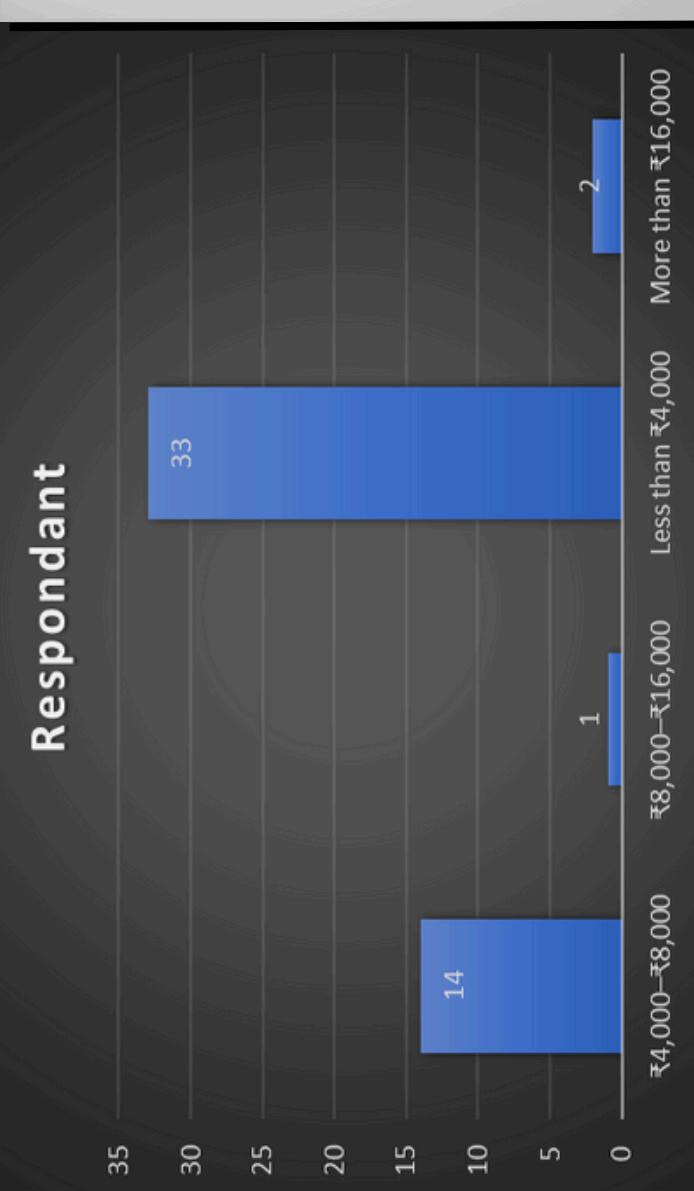


Solutions: -

- Tax Benefits for Caregivers – Provide tax deductions for families supporting elderly members, reducing financial strain.
- Increased Public Healthcare Funding – Expand geriatric services, train healthcare workers, and invest in affordable senior care facilities.
- Stronger economic policies can ensure accessible, affordable, and effective healthcare for the elderly.

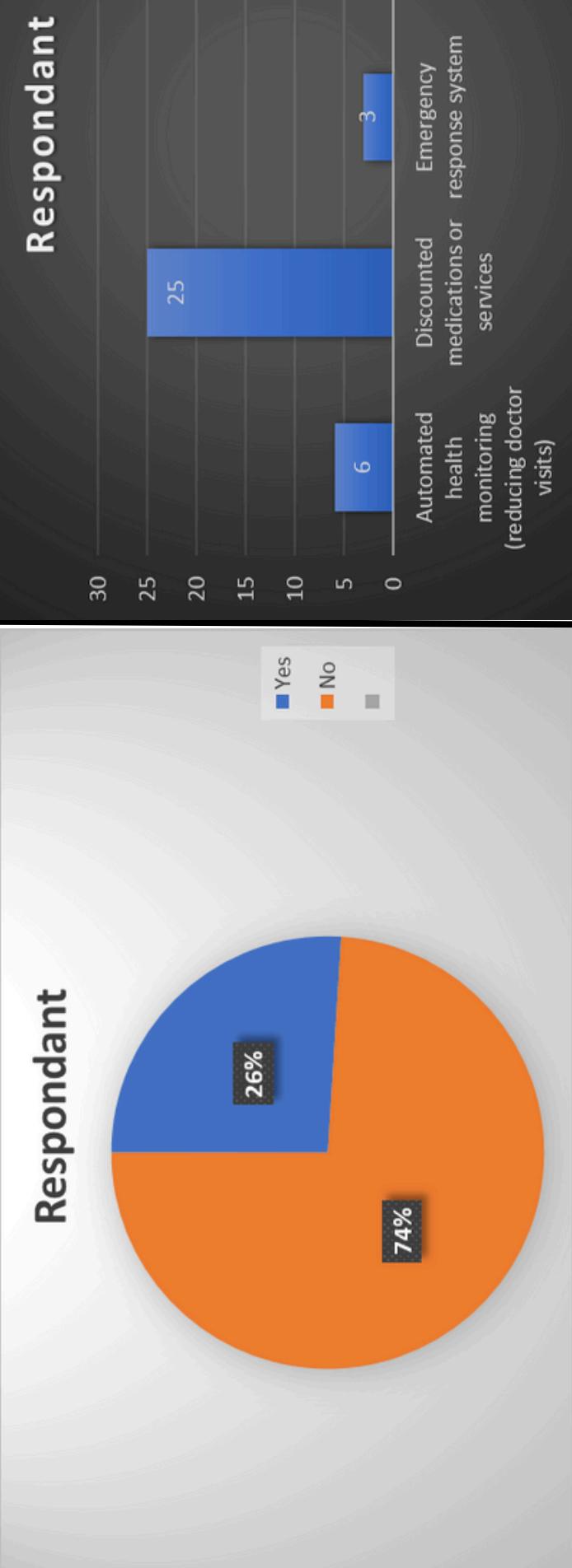


Understanding Economic & Healthcare Concerns



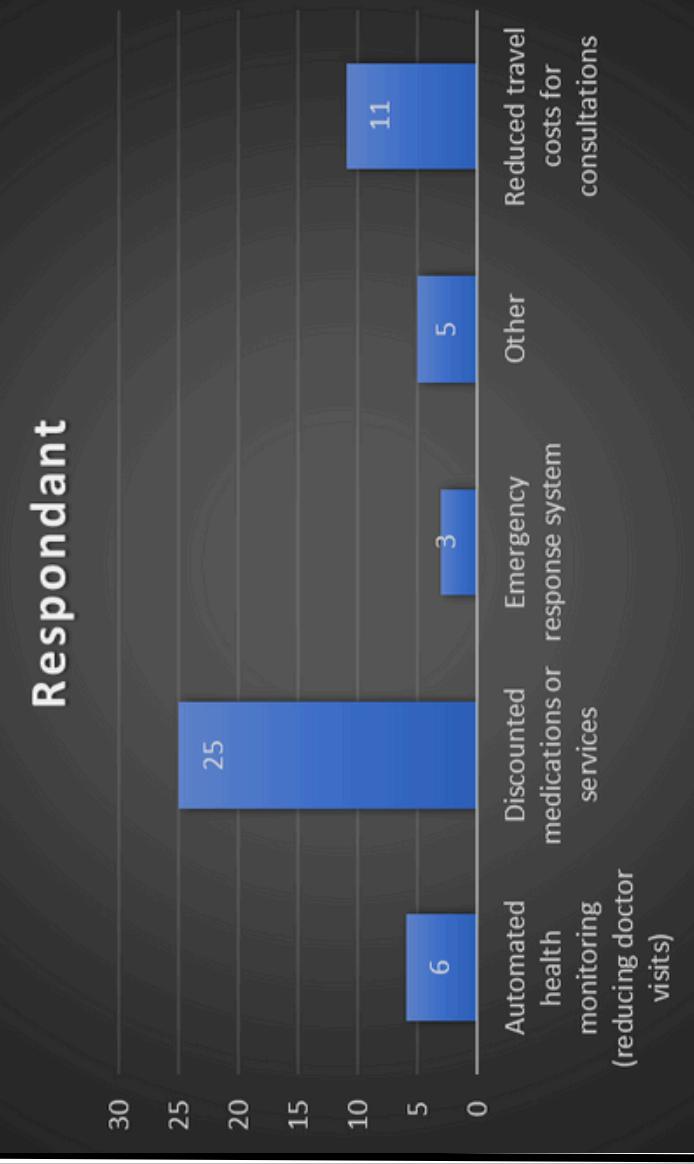
What would you consider an affordable monthly fee for such a service?

Affordable monthly fee for such a service	Respondant
₹4,000–₹8,000	14
₹8,000–₹16,000	1
Less than ₹4,000	33
More than ₹16,000	2



Do you feel your current healthcare spending is sustainable in the long term?

current healthcare spending is sustainable in the long term	Respondant
Yes	13
No	37



What features of a healthcare support system would you find most economically valuable?

healthcare support system would you find most economically valuable	Respondant
Automated health monitoring (reducing doctor visits)	6
Discounted medications or services	25
Emergency response system	3
Other	5
Reduced travel costs for consultations	11

Solution's

- Cheaper Healthcare Plans – Offer different plans to fit different budgets, with basic services costing less than ₹4,000 per month.
- Lower Long-Term Costs – Focus on preventive care, affordable health insurance, and employer-supported healthcare to reduce expenses.
- Better Support Features – Provide discounted medicines, online doctor consultations, home check-ups and quick emergency services to make healthcare easier and more affordable.





Future Plans

- Expanding volunteer outreach to more areas.
- Increasing social media presence for awareness.
- Partnering with local NGOs & elderly care organizations.
- Organizing community events & workshops for intergenerational bonding.





#YOUTH4ELDERS

"The strength of a community is measured by how it cares for its elders. They are not a burden but a treasure of wisdom, love, and experience." 

