

DECLARATION

I hereby declare that this dissertation entitled Welfare Administration of the Aged in Mizoram: A Study in Aizawl District is the result of my own research work under the guidance and supervision of Dr Lalneihzovi, Associate Professor, Department of Public Administration, Mizoram University.

I further declare that this dissertation or any part of it has not been submitted for any other degree or diploma course in the same university or elsewhere.

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MARY LALNGAIHAWMI

ABBREVIATIONS

ADC	: Autonomous District Council
AMC	: Aizawl Municipal Council
BPL	: Below Poverty Line
CBHCE	: Community Based Health Care for the Elderly
CBI	: Central Bank of India
CDPO	: Child Development Project Officer
CSS	: Centrally Sponsored Scheme
DC	: District Council
DSWO	: District Social Welfare Office/Officer
FASC	: Federation of Association of Senior Citizens
GA	: General Assembly
GS	: General Secretary
IGNDPS	: Indira Gandhi National Disability Pension Scheme
IGNOAPS	: Indira Gandhi National Old Age Pension Scheme
IGNWPS	: Indira Gandhi National Widow Pension Scheme

KTP	: Kristian Thalai Pawl
LDC	: Lower Division Clerk
LIC	: Life Insurance Corporation
MHIP	: Mizo Hmeichhe Insuihkhawm pawl
MLA	: Mizoram legislative Assembly
MMU	: Mobile Medicare Units
MOHFW	: Ministry of Health and Family Welfare
MOSJE	: Ministry of Social Justice and Empowerment
MUP	: Mizoram Upa Pawl
MWPSCA	: Maintenance and Welfare of Parents and Senior Citizens Act 2007
MZP	: Mizo Zirlai Pawl
NCOP	: National Council for Older Persons
NFBS	: National Family Benefit Scheme
NGOs	: Non Governmental Organizations
NICE	: National Initiative on Care of the Elderly
NISD	: National Institute of Social Defense
NMBS	: National Maternity Benefit Scheme
NOAPS	: National Old Age Pension Scheme
NPHCE	: National Programme on Health Care of the Elderly

NPOP	: National Policy on Older Persons
NSAP	: National Social Assistance Programme
OAH	: Old Age Home
OASIS	: Old Age Social and Income Security
OB	: Office Bearers
OPD	: Out Patient Department
PC	: Planning Commission
PO	: Post Office
PRIs	: Panchayati Raj Institutions
PSP	: Population Stabilization Programme
RD	: Rural Development
SBI	: State Bank of India
SC	: Scheduled Caste
SCOP	: State Council for Older Persons
SCSS	: Senior Citizens Savings Scheme
SPOP	: State Policy for Older Persons
ST	: Scheduled Tribe
SWD	: Social Welfare Department
UCO	: United Commercial Bank
UN	: United Nations
UT	: Union Territory
VC	: Village Council
WHO	: World Health organization
YMA	: Young Mizo Association

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**WELFARE ADMINISTRATION OF THE AGED IN
MIZORAM: A STUDY IN AIZAWL DISTRICT**

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CHAPTER-I

INTRODUCTION

Old age is a natural part of the human life cycle. There is a big difference between aging of man and aging of the population. Aging of man is a continued process; it is a biological phenomenon that begins from birth. In other words, aging is a complex sequence of changes. It is a time when the organs and functions of the body become impaired. It is part of the life span when both physical and mental deterioration commences. There are major changes not only in appearance but also interests, attitude and lifestyle undergo changes.

On the other hand, the aging of the population is the rapid increase in the proportion of the senior citizens. Population ageing occurs as older individuals form larger share of the total population. It is one of the most important consequences of decline in fertility and mortality rates accompanied by increase in life expectancy. Population ageing is one of humanity's greatest triumphs. It is also one of our greatest challenges. As we enter the 21st century, global aging will put increased economic and social demands on all countries. At the same time, older people are a precious, often ignored resource that makes an important contribution to the fabric of our societies.¹

¹ Harlem Brundtland Gro, (1999) *Active Ageing: A Policy Framework*, World Health Organization, p. 5.

While global aging represents a triumph of medical, social and economic advances over disease, it also presents tremendous challenges. Population aging strains social insurance and pension systems and challenges existing models of social support. It affects economic growth, trade, migration, disease patterns and prevalence and fundamental assumptions about growing older.²

In academic research, the senior citizens are people who have reached the age of 60 years. They constitute a precious reservoir of human resource due to their knowledge, experiences and deep insight.

WELFARE OF THE AGED: INTERNATIONAL CONCERNS

The United Nations define a country as aging where the proportion of people above 60 years reaches 7 percent. It was back in the 1980s that international concerns towards the aged started. The convening of World Assembly on Aging in 1982 and adopting the Vienna International Plan of Action on Aging was the first organized effort towards aging. The Plan of Action called for specific action on such issues as health and nutrition, protecting elderly consumers, housing and environment, family, social welfare, income security and employment, education and the collection and analysis of research data.

Recognizing the value of older persons all over the world, the United Nations General Assembly adopted the United Nations Principles for Older Persons in 1991. In the same year, the United Nations proclaimed 1st Oct as

² Why Population Aging matters: A Global Perspective, Working paper of the National Institute on Aging, US Department of State, p. 3.

the International Day of Older Persons. Further, it declared 1999 as the International Year of Older Persons.

The UN General Assembly in 1991 adopted 18 Principles which are organized in five (5) clusters namely: independence, participation, care, self fulfilment and dignity of older persons.

The second World Assembly on Aging was convened in Madrid from 8th – 12th April 2002 by the United Nations. Its main purpose was to assess the progress made by Member States during the past 10 years in implementing the Vienna Plan of Action. The 2002 International Plan of Action on Aging calls for change in attitudes, policies and practices at all levels in all sectors so that the enormous potential of ageing in the 21st century may be fulfilled. The Plan of Action aims to ensure that persons everywhere are able to age with security and dignity and to continue to participate in their societies as citizens with full rights.

The population of the world is expected to increase to 9.4 billion by 2050 from its current size of 6.1 million. During the same fifty years, the percentage of the elderly population, those aged 60 or above are expected to increase from 9.9 to 20.7. For the first time, the number of the aged is expected to surpass the number of children under 14 years of age by the year 2050. Interestingly among the aged, it is the oldest old (those aged 80 or above) which will increase most rapidly over time. Their number is

projected to reach a level of 320 million in 2050.³ The West has tried to find a solution to this crisis by making available institutional support outside the family system. Such attempts, however, are not viable in countries where funds are scarce and where living outside one's family is a difficult proposition. Also, apart from their emotional value, the aged are of very little economic value to the family. With health care and long term care costs arising at a rapid rate, negligence of the aged may take on serious proportions.⁴

The aging of the world's population introduces severe major policy challenges and its unprecedented nature means that we cannot look to earlier historical episodes for guidance on how this demographic upheaval will unfold or on how best to manage it. In most countries, the most rapid increase in aging has not yet occurred. This grants policy makers a window of opportunity in which to prepare for this change. Initiating early action can better prepare countries to deal with the social, economic and political effects of an impending altered population structure.⁵ According to the World Health Organization, 'the aging of population represent an

³ Rajan S. Irudaya, Perera M, Begum Sharifa, *Economics of Pensions and social security in South Asia: Special focus on India, Sri Lanka and Bangladesh*, Centre for Development Studies, Thiruvananthapuram , p. 2.

⁴ Chakraborti Rajagopal Dhar, (2004) *The Greying of India: Population Ageing in the context of Asia*, New Delhi: Sage Publications India Pvt Ltd, p. 27.

⁵ Bloom E. David, Canning David, Fink Gunther, (2011) *Implications of Population Aging for Economic Growth*, Working Paper Series number 64 PGDA, (Program on the Global Demography of Aging) p. 8.

opportunity for societies. If older people can retain their health and if they live in an environment that promotes their active participation, their experience, skills and wisdom will be without any doubt a resource for societies. However, most people of very advanced countries will need accessible and effective acute and long term care. Developing integrated systems that provide seamless access to the care that require is a priority for both the developed and developing countries.’

WELFARE OF THE AGED: NATIONAL CONCERNS

In India, after independence, social welfare was given its due place in the objectives to be pursued by the Government of India for the welfare of its people. The Constitution of India, in its Preamble, postulates the goals of a Welfare State. The concept of social welfare is also visualised in the Fundamental Rights, Directive Principles of State Policy and Provisions relating to welfare of the Scheduled Castes and Scheduled Tribes and Other Backward Classes. Further, most of the subjects concerning the social aspects of life are included in the Concurrent List. Both the Central and State Governments can legislate on these subjects. The Central laws on Social Welfare ensure uniformity in services and programmes in different States of India.

Welfare of the Aged in the Indian context is discernible in the Constitutional Provisions. Article 41 of the Directive Principles of State Policy specifies that the State shall, within the limits of economic capacity, provide for assistance to the elderly. In the Constitution of India, entry 24 in List III of Schedule VII deals with the welfare of labour, including conditions of work, provident funds, liability for workmen’s compensation,

invalidity and old age pension and maternity benefits. Item no 9 of the State List and item 20, 23 and 24 of the Concurrent List relates to old age pension, social security and social insurance and economic and social planning. This constitutional provision is backed by section 125 of the Code of Criminal Procedure, 1973, under which every persons having sufficient means is required to provide for his parents who are unable to maintain themselves. Section 20(3) of the Hindus and Maintenance Act, 1950 makes it obligatory on the part of the person to maintain his aged or infirm parents. If any person refuses or neglects to maintain their parents, a magistrate may order such a person to make a monthly allowance for the maintenance of his or her mother or father at a monthly rate not exceeding Rs 500. Apart from this, the Maintenance and Welfare of Parents and Senior Citizens Act have been passed in 2007.

The Planning Commission is the chief agency to translate into practice the Constitutional Provisions relating to Welfare State. It is responsible for the formulation of Five Year Plans in order to give concrete shape to development efforts. From the First Five year Plan to the Sixth Five Year Plan, the aged in India did not receive any special mention.

It was only in 1978 that the Seventh Finance Commission noted the varying in regard to old age pensions (non contributory) for the destitute in different States including its absence in some States and the very low rates of pension in some.

The Eighth Plan noted that the earlier Plans had made a modest beginning in the designing and importance of programmes for the welfare of the destitute, the handicapped, the elderly and other categories in need of

welfare services. It also mentioned the World Assembly on Aging held in 1982 which provided an occasion to assess the changed social scenario for care of the aged and to initiate programmes for their well being. “The coverage of elderly persons without any means of support will be expanded through the schemes of old age pensions of the State Governments”. The main thrust of the programmes for the elderly will be non institutional services which are family and community based. The Plan holds that financial assistance will be given to voluntary agencies to provide not only care but also help improve the incomes of the elderly besides involving them closely in the activities of the community so that they are not marginalised.

The Ninth Plan noted policy prescriptions to extend support for financial security, health care, shelter, welfare and other needs of older persons, to provide protection against the dangers of life and property, abuse and exploitation of older persons and to extend opportunities for older persons to contribute their mite in various developmental goals. It was during the Ninth Plan that the National Policy on Older Persons was passed in 1999.

The Tenth Plan noted that financial insecurity is one of the prime problems besetting the aged, and that it will endeavour to draw upon the mandate of the National Policy to provide a whole range of interventions like pension scheme, financial preparation of the old age, helping productive aging of the aged to income generating activities etc. The Plan also laid emphasis on immediate steps to be initiated in collaboration with all the concerned to curb the increasing crimes against the aged either by amending

the Indian Penal Code or, if necessary, by enacting a new legislation to ensure the protection of their life and property.

The Eleventh Five Year Plan holds that India has the second largest population of the aged in the world. The number of the aged in the population is expected to increase from 71 million in 2001 to 173 million in 2026. A majority (80 percent) of the elderly population in India is in the rural areas, thus making service delivery to them a challenge, and there are a large number of 80+ persons in the country. The Plan noted that a National Association for older persons as per the National Policy on Older persons will be set up. It also holds that the National Old Age Pension Scheme will be extended to all BPL persons above 60 years. It further noted that a pension of Rs. 200/- per month will be provided and States will be requested to add another Rs.200/- to the scheme.

The problem of the elderly in India was not serious in the past because the numbers were small and the elderly were provided with social protection by the family network. But owing to relatively recent socio-economic changes, aging of the population is emerging as a problem that requires consideration before it becomes critical. However, a few studies indicate that family and relatives still play an important role in providing economic and social security for the elderly. But most of these studies relate to the middle and higher socio-economic classes where the elderly own the means of production and have sufficient economic resources not to be

affected adversely. Those in the lower levels of social strata, who constitute the majority, will need social and economic support.⁶

Among the positive factors which have been sustaining the elderly in India is the strong attachment of family members to the elderly. Social pressure continues to be placed on persons who fail to discharge this responsibility to their elderly family members. Thus it is important to strengthen these values and the capacity of families to cope with the problems of caring for the elderly. The elderly should be considered as human resources and their rich experience and residual capacities should be put to optimum use for the benefit of national development. Their ability to lead healthy and fruitful lives should be ensured by the Government.⁷

Population aging is a worldwide phenomenon, and India is no exception to the rule. Census reports indicate that the Indian population has approximately tripled during the last 50 years, but the number of elderly Indians has increased more than fourfold. When considering the continuation of the trend, the UN predicts that the Indian population will again grow by 50 percent in the next 50 years, whereas the elderly population is expected to grow another fourfold.⁸

The National Policy for Older Persons was passed in 1999; its main thrust is to promote the financial security, health care and nutrition, shelter

⁶Chanana H.B., Talwar P.P., *Aging in India: Its Socio-Economic and Health Implications*, Asia Pacific Population Journal Volume 2 No 3, p. 34.

⁷ *Ibid.*, p. 38.

⁸ Bhattacharya Prakash, (2005) *Implications of an Aging Population in India: Challenges and Opportunities*, Institute of Chartered Financial Analysts of India, p. 2.

and welfare of senior citizens in India. It recognises persons aged above 60 as senior citizens. It seeks to assure older persons that their concerns are national concerns and they will not live unprotected, ignored and marginalized. In 1947, when India became independent from British rule, life expectancy was around 32 years. Improvements in public health and medical services have led to substantial control of specific infectious diseases which translated into significant decreases in mortality rates. Life expectancy at birth rose steadily and by 1990 had reached 60 years.⁹ According to the World Health Organization, in 2009, 68 years became the average life expectancy at birth of the global population.

According to 2001 census, the total number of over 60 population was 76 million. It is expected to increase to 137 million by 2021. The proportion of the aged in 2001 according to Irudaya Rajan was 7.5 percent. The growth rate for the period 1991-2001 for the aged is close to 40 per cent, more than the general population growth rate. According to the office of the Registrar General of India, the percentage share of the 60+ population in 2011 was 8.30 percent. The proportion is expected to reach 12.6 percent in 2025.

Conceptual Framework

The concept of State as an agency of human welfare is not new. Right from the inception of State, emphasis has been laid on its utility as a moral

⁹ Jai Prakash Indira, (1999) *Aging in India*, Geneva: Paper presented at the World Health Organization, p. 1.

institution. The hallmarks of the modern welfare State are social welfare, social security and social justice for the weaker sections of the society. The concept of Social Welfare has undergone some change over the years. In accordance with the change in concept, the objectives and methods have also been changing. These days, the approach to social welfare work is more collective and aims to achieve public good. The State has taken upon itself the responsibility for moral and physical well being of all citizens.

(a) Defining ‘Welfare’

According to Chambers Dictionary, ‘Welfare is the state of faring or doing well, enjoyment of health and prosperity and freedom from calamity. The notion of welfare State implies, among others, that the Government shall strive to give every citizen an equal opportunity for self realisation through access to education, healthcare, housing and adequately remunerated employment. In fact, the true nature of a welfare State is tested by the treatment meted out to the less privileged sections of the community. In short ‘welfare’ simply means well being of citizens.

(b) Defining ‘Administration’

Chambers Dictionary defines Administration as the act of administering. It is the management of affairs of the people. According to J.M Pfiiffner, “Administration is the organization and direction of human and material resources to achieve desired results.”

(c) Defining ‘Welfare Administration’

Social Welfare Administration is the process of transforming social policies into social services. Social Welfare Services are the services which cater to the special needs of persons and groups who suffer from some handicap, social, economic, physical or mental and so are unable to avail themselves of or are traditionally denied the amenities and services provided by the community. The aim of social welfare is to uplift the living conditions of individuals in the society in general and alleviating the lot of the destitute, deprived, disadvantaged and underprivileged sections of the society in particular. It also involves income maintenance and support programmes along with a wide range of services developed to meet human needs and respond to social problems.

(d) Defining ‘Aged’

In most Gerontological literature, people above 60 years of age are considered as ‘old’ and as constituting the elderly segment of the population. In academic research, the retirement age is often regarded as an index of aged status.¹⁰ The retirement age in most Government jobs in India is fixed at 60 years and 65 years in the Universities. Thus the people above 60 years are termed as aged or elderly though the preferred term or current choice is ‘older persons’. However, the term ‘aged’ will be used in this study.

¹⁰ *Ibid.*, Jai Prakash Indira (1999), p. 2.

(e) Defining Welfare Administration of the Aged

Social Welfare Administration includes within its ambit welfare of the aged. Welfare administration of the aged refers to the services provided to the people above 60 years or over. It includes maintenance of services and facilities to cater to the special needs of the aged population. Generally speaking, in the life of a man there are two stages of dependency- childhood and old age. In the intervening years of adult life, there are likely to occur spells during which he cannot earn his living.

Review of Literature

There are a number of books dealing with the aged and their problems. The scholar has undertaken review of the following literature to study and analyse the available materials in the present study area:

C.N.Shankar Rao in his book *Principles of Sociology* holds that it is only for a blessed few old age may prove to be a stage of contentment and satisfaction. But for a large number of people, it may actually become a period of disappointment, dejection, disease, repentance and loneliness.

D.R. Sachdeva (2008) in his book *Social Welfare Administration* offers a comprehensive detail about Social Welfare Administration; its concept, scope, evolution, institutional agencies like National Institute of Social Defence, Central Social Welfare Board, voluntary organizations etc. Welfare services of women, child, youth, aged, Scheduled Tribes and Scheduled Castes, other backward classes, labour, poor etc are examined in detail. He holds that due to generation gap, the aged are feeling unwanted and therefore suffer from

numerous familial, social, economic, psychological and emotional problems. According to him, the miseries of the aged persons have been increased due to the breakup of the joint family system.

Social Welfare in India edited by H.Y. Siddique is a collection of articles presented at a seminar on the theme of social welfare. It covers all the major fields of social welfare like theories, concepts, functions, issues of social welfare, child welfare services & programmes, women welfare, youth welfare, handicapped welfare, aged welfare services etc.

K.S.Soodan (1975) in his book *Ageing in India* analyses the socio-economic status of the aged, health services, occupational patterns, eating habits, emotional status, welfare and social security programs for the aged. He holds that due to the gradual decline of the joint family system, the needs of the aged are not being met adequately by their families nor is the State coming forward with a comprehensive programme for promoting the welfare of the aged.

In their paper, *Services for the Aged in India*, M.Z.Khan and Neelam Bagley analyses the situation of the aged in India. They pointed the various problems of the aged and analyzed the various services available for the aged in India in terms of social security, public assistance, health services, day care facilities, institutional care etc. They also pointed out the inadequacy of the old age pension.

The book *Sociology of Ageing* written by D.P.Saxena (2008) analyses the bio- psycho, socio-economic and cultural aspects of aging problems in India. It also explores ways and means of their socio-cultural adjustments to the aging

problems. According to him, there are three major needs of the elderly, i.e., health needs, economic needs and socio- psychological needs. He holds that the aged who were treated reverentially in primitive, pre industrial societies, existing in a Golden Age are now much worse off in modern societies. They are being neglected by their families, forced into boring and meaningless retirement and derogated by the youth culture.

The book *Aging in North East India; Magnitude of the Problem of Elderly Persons in Mizoram* edited by Lianzela and Vanlalchhawna (2007) is a collection of articles covering diverse themes like growth of elderly population in Mizoram, their socio economic status, health conditions and facilities, economic and social security programme, social work intervention and role of Mizo Upa Pawl (Senior Citizens Association). The book provides vital statistical data and information about the elderly population in Mizoram and the problems faced by them.

Changing Indian Society and Status of the Aged edited by M.G. Hussain (1997) is a collection of articles divided into three parts. The first part deals with the concept and nature of ageing, problems of ageing, policies, strategies and programmes of the Government and Non Governmental Organisations (NGOs). The second part deals with adjustment problems, values of the aged and other psychosocial problems and personality patterns of the aged. Part three deals with physiotherapy, health, and psychobiology of aging. He holds that the status of the aged in India is not uniform in all parts of the country. Some States have taken the initiative for welfare activities for the aged encouraged by the social, economic and cultural ethos of those States.

The Greying of India: Population Ageing in the Context of Asia written by Rajagopal Dhar Chakraborti (2004) is a broad overview of ageing in Asia. It is an analysis of the demographic and socio-economic characteristics such as size, age-sex composition, spatial distribution and social and economic conditions of the aging populations in India in the context of Asia. It also investigates the implications of future trends and patterns of the ageing population on socio-economic development programmes relating to health, savings, investment, consumption patterns, workforce participation, migration, social security etc. The author discusses the factors contributing to fertility and mortality transitions in Asia. He holds that by 2050, every fourth person will be an elderly in Asia. He also pointed out the importance of promoting graceful ageing.

Indian Social Problems volume 2 by G. R. Madan deals with the concept and scope of social welfare in India, UK, USA; Social welfare services like child welfare, women welfare, youth welfare, family welfare, urban and rural community welfare, labour welfare, welfare of backward classes, social security and assistance provided to the physically handicapped, aged, and infirm. He holds that the problem of the aged and the infirm has become acute with the disintegration of the joint family system and rapid urbanization.

Handbook of Indian Gerontology edited by P.V. Ramamurthi and D. Jamuna (2004) is a collection of seventeen articles on ageing. The book covers various aspects of aging in India starting from demographics, biological aspects, health care, psychiatry, nutrition, mental health, elderly abuse, memory status, role of Non Governmental Organisations (NGOs), policy issues etc.

In his paper, *Perspectives on Indian Research on Ageing*, P.V.Ramamurthi talks about the existence of more than 2300 research articles on ageing in India which are published in journals or articles usually in edited volumes. He pointed out the urgent need for setting up of an agency in India for monitoring and gathering unpublished material on ageing for availability to researchers.

Aging in India: Challenge For the Society edited by M.L Sharma and T.M.Dak is the product of a three day seminar on “Aging in India: Challenge for the society”. Part I deal with the extent and magnitude of the aging problem, policies and programmes available for the aged in India. Part II deals with aging problems from socio- psychological perspectives. Part III deals with the health and medical aspects of the aged.

The book *Social Welfare in India* written by Nalini Paranjpe (1990) is a comprehensive study of social welfare policies and programmes of the Government of India. It lays emphasis on policies, programmes, institutions meant for children, women, physically and mentally handicapped and the aged. According to her, industrialization and urbanization has had a major impact on the Indian family system, with the result that though this responsibility is still being discharged by the family, force of circumstances is leaving some old people without any means of support.

A survey of literature reveals that in spite of increasing attention on ageing and its problems, no study exists on the administration of welfare programmes for the aged in Mizoram. In India, much of the studies on the aged have been done from sociological and other point of view. Most of the available books also consist of edited books and compilation of papers

presented in seminars and conferences. Thus the subject of welfare administration of the aged is of great importance and is relevant to the Government of Mizoram and the public.

Justification for the study

In Mizoram, respect for the elders is one of the basic principles evolving out of '*Tlawmngaihna*'.¹¹ This concept has been embedded in the Mizo psychology since time immemorial. The older generations were held in high esteem and were looked to for advice and guidance. However the status of the aged has been undergoing a change due to modernization and industrialization.

The Mizo society follows a patriarchal pattern and wives are brought into the parental house so that the younger ones would care for the older ones. The most common living arrangement is living with the youngest son and his family. Thus to a great extent, older people are still cared for by their family. Living in old age homes is not popular as there is criticism from the society and family network at large.

At the same time, the aged represents a large proportion and their number is increasing. According to the 2011 Provisional Census Report, the population of Aizawl City stands at 404,054. However, at the time of study, the Provisional Report has not yet generated any statistics indicating the number of 60+ population due to lack of final population tables. Therefore, the present researcher has to rely on 2001 Census Report which indicates the number of elderly persons, i.e., above 60 years as 18019.

¹¹ The Mizo term '*Tlawmngaihna*' means a high sense of moral duty towards fellow citizens, rendering service to the society and helping those in need.

Percentage of the elderly population in 2001 census was 5.53 percent. They constitute a category which requires special attention. There are two categories of the aged, the pensioners and the socially assisted aged. The aged are further subdivided into three groups: the young old (60-69 years), the old old (above 70 years) and the oldest old (above 80 years). All these groups have their own problems and needs which differ from each other. Thus the aged face various problems in terms of security, health etc. There is need to find out whether the implementation of Governmental programmes is being done efficiently for the benefit of the targeted group. The proposed study, welfare administration of aged persons is undertaken to find out the extent of implementation of various welfare programmes and schemes meant for the aged and whether there is need to do anything more in this regard.

Objectives of the Study

The main objectives of the present study are:

- to identify the existing programmes, services and facilities available for the aged.
- to assess the problems faced by the aged and the impact of welfare schemes on living conditions of the aged.
- to analyse the problems in implementation of programmes to improve the welfare of the aged.

- to examine the role played by Non Governmental Organisations (NGOs) like Mizo Upa Pawl (Senior Citizens Association) to improve the welfare of the aged and
- to recommend suggestions for improvements concerning the welfare and development programmes of the aged.

Research Questions

The research questions are:

- (i) What is the impact of welfare programmes on the living conditions of the aged?
- (ii) Are welfare programmes meant for the aged properly implemented by the Government of Mizoram in Aizawl District?
- (iii) Is the State Government committed to promoting the welfare of the aged?

Scope of the Study

The present study was conducted in Aizawl District. It examined the various Centrally Sponsored Schemes and Projects implemented by the Government of Mizoram for the welfare of the aged. It also examined the role played by the Social welfare Department in the context of State Policy for Older Persons, 2003, and its role as an implementing agency concerned with welfare of the aged. Attempts were also made to examine interactions between the Government of Mizoram and Non Governmental Organisations (NGOs) involved in the welfare of the aged and the respective roles played

by them. It also studied institutional facilities (old age home) available in Aizawl District. It attempts to identify the hurdles in the implementation of the programmes and suggest measures for effective implementation of the programmes.

Methodology

Data for the proposed study was collected through primary and secondary sources. Primary Data was collected through questionnaire administered to Social Welfare Officers of the State Government. Information was also collected from Census Reports, Statistical Handbooks of Mizoram, Government records, Government Documents, Records and documents of Non Governmental Organisations (NGOs) concerned with welfare of the aged. The Office-bearers of Non-Governmental Organisations like Mizo Upa Pawl (Senior Citizens Association) were given questionnaire. In order to assess the problems faced by the aged in Aizawl District, questionnaire was administered to beneficiaries of old age pension and non beneficiaries residing in different localities of Aizawl. Random sampling method was employed. There were also interactions with caretaker, warden and inmates of the Old Age Home.

Secondary Data was obtained from books, journals, newspapers, websites, and other relevant published or unpublished works.

Chapterisation

The present study is divided into five (5) chapters.

The first chapter is the introductory part of the whole study which deals with the general background of the topic of research, international and national concerns towards the aged. The chapter also presents the conceptual framework, the objectives of the study, the research questions, scope and methodology adopted for carrying out the present study.

In the second chapter, an outline on facts about the State of Mizoram is presented. Then an attempt has also been made to explain the notion of welfare and the evolution of the notion of welfare of the aged in Mizoram.

The third chapter begins with an outline on schemes provided by the Government of India followed by a discussion on the existing programmes and facilities provided by the Government of Mizoram and their implementation.

The fourth Chapter has analysed people's participation in Welfare of the Aged in Mizoram i.e., Role of Non Governmental Organizations (NGOs) with particular reference to Mizoram Upa Pawl (Mizoram Senior Citizens Association).

The fifth Chapter is a concluding chapter which has brought out the summary and findings of the study with some suggestions.

CHAPTER-II

EVOLUTION OF THE NOTION OF WELFARE OF THE AGED IN MIZORAM

Profile of Mizoram

Mizoram is a small State with an area of 21,087 square kilometres having a length of 277 km from North to South and 121 km from East to West. It is situated in the southernmost corner of North East India, between 21.56 to 24.31 degrees north latitude and 92.16 to 93.20 degrees east latitude. Mizoram was formerly known as the Lushai Hills District of Assam. By an Act of Parliament, the Lushai Hills District was changed to Mizo District on 20th April 1959. The Mizo District was declared as a Union Territory on 21st Jan 1972 and fifteen years later, full statehood was granted to the Union Territory on 20th Feb 1987.

Mizoram, the land of the Mizo people thus became the 23rd State of India on 20th February 1987. It is one of the Seven States of North East India, sharing borders with the States of Tripura, Assam, Manipur and with the neighbouring countries of Bangladesh and Myanmar. Mizoram is a mountainous region. The highest peak is Phawngpui. It is also called 'Blue Mountain'. Located in the southern part of Mizoram, it has a height of 2210 meters. There are other hill ranges running from north to south with an average height of about 900 meters. The longest river is tlawng (Dhaleswari) in the north (185.15 kms).

The word 'Mizo' is a generic term which means hill men or highlanders. The Mizo consists of several clans like Lusei, Hmar, Pawi, Paihte and Ralte. Apart from these, there are Lakhers (Maras) and Chakmas who inhabit the southernmost parts of Mizoram and the western areas bordering Bangladesh. The Chakmas were originally inhabitants of the Chittagong Hills of Bangladesh. There are also a sizeable number of Nepalis scattered in the whole of the State. The main occupation of majority of the Mizo is agriculture by means of Shifting cultivation or Jhuming. Paddy is the principal crop but different kinds of crops like maize, pumpkin, brinjals, chillies etc are also grown.

Mizoram is divided into 8 districts namely Aizawl, Champhai, Kolasib, Lawngtlai, Lunglei, Mamit, Chhimtuipui, Serchhip. Aizawl (formerly Aijal) is the capital of Mizoram. There are also 3 Autonomous District Councils namely Chakma District Council, Lai District Council and Mara District Council in the southern region. There are forty (40) seats in the Mizoram State Legislative Assembly. The State has two (2) seats in the Parliament, one (1) in the Lok Sabha and one (1) in the Rajya Sabha. The first election to the Municipal Council was held in 2010. There are 19 members in the Council including 6 women. According to the Statistical Handbook of Mizoram 2010, there are 23 Sub Divisions, 26 R.D. Blocks and 817 villages out of which 110 are uninhabited.

The main religion of the people of Mizoram is Christianity. The Christian Missionaries from Wales came in the 19th century. They not only brought Christianity into the region but were also responsible for the spread

of education. According to the 2011 census, the percentage of literacy is 91.58 percent which is the second highest in India, next to Kerala.

As per the oral tradition, the Mizo ancestors emerged from a cave or rock known as Chhinlung somewhere in China. They moved through Tibet into the Hukwang Valley in Burma over time, following the Chindwin into the Kubaw Valley to enter the Lushai Hills in the 18th century¹². People also believed that the Mizo had migrated from China during the reign of Chien Lung (hence the Mizos most probably called Chhinlung) and was believed that a part of the lost ten tribes of Israel found themselves in China¹³ However, Mizo historians such as K. Zawla and Reverend Liangkhaia who wrote “Ancient History and culture of the Mizo people” and “History of Lushai” have argued that the Mizo were in the Chin Hills in Burma from 1400 AD to 1700 AD. But in the absence of any written history, more accurate dates about the movement cannot be envisaged.¹⁴

According to the Census of India 2011 Provisional Population Totals, the population of the State of Mizoram was 10, 91,014 with a rural population of 529,037 and an urban population of 561,977. The entire male population is 552,339 and the female population stands at 538,675. The sex

⁸ Verghese B.G., (2004) *India's Northeast Resurgent: Ethnicity, Insurgency, Governance, Development*, Konark Publications, Delhi, p. 135.

¹³ Kiangte laltluangliana, (2008) *Mizos of North East India: An introduction to Mizo Culture, Folklore, Language and Literature*, Mizoram, L.T.L Publications, p. 15.

¹⁴ Patnaik J.K., (ed) (2008) *Mizoram: Dimensions and Perspectives*, New Delhi, Concept Publishing House, p. 7.

ratio is 975 females per 1000 males. The decadal population growth from 2001- 2011 is 2, 02,441 (22.78 percent). The total population in 2001 Census was 8, 88,573.

According to the 2011 Provisional Census Report, the population of Aizawl District stands at 404,054. Percentage of decadal growth rate of population from 2001-2011 is 24.07 percent. However, the Provisional Report has not generated any statistics indicating the number of 60+ populations at the time of study. Thus due to lack of final population tables at the time of writing this, there is need to rely on 2001 Census Report which indicates the number of the aged in Aizawl District, i.e., above 60 years as 18019. Percentage of the elderly population in 2001 census was 5.53 percent, the total aged population of Mizoram being 49023.

The notion of welfare of the aged: Its evolution in Mizoram

Welfare is the state of faring or doing well, enjoyment of health and prosperity and freedom from calamity. Welfare in short means well being. Social Welfare means the well being of the society. The maintenance of well being of the society is the realm of social welfare policy. In turn, social programs are the products of social welfare policies.

Social Welfare is a crucial aspect of modern social organisation. This is due to the nature of man since his survival depends upon the cooperation and help of his fellow human beings. Thus social welfare is the product as well as the instrument of an individual's inherent dependence for his survival and his well being on the help of other human beings. This mutual dependency is intensified in particular individual and social circumstances.

One basic and universal cause of social dependency is physical or mental incapacity due to illness, disability and old age. In every society, there are people who have been incapacitated to an extent that they cannot provide for themselves. They must receive care and financial aid from others.

The evolution and growth of social welfare in India extends over hundreds of years. In ancient India, social welfare was based mainly on religious and socio-philosophical considerations, acts and charities. Apart from the State and charities, the joint family system, caste system and the community did a lot for the welfare of its members. During the Medieval period, administration was in the hands of the Rajputs, Sultans and Mughals. Social welfare was the least in the minds of the Rajputs and Sultans. This is with the exception of Feroz Shah Tughlak and Sher Shah Suri who provided welfare services. During the British rule, Warren Hastings took the initiative in pronouncing that it was the duty of the Government to promote the welfare of its people. The transfer of power to the British Crown led to a series of welfare activities. After independence, Social Welfare was given its due place in the objectives to be pursued by the Government of India for the welfare of its people.

Social Welfare and its manifestations in the form of social services, social reform, social security etc have come to be prominently used in the 20th century but social welfare in its rudimentary form did exist in punitive societies as well because the desire of people to help one another in times of need and stress is deeply ingrained in human nature. Moreover, all the religions of the world enjoin upon their devotees and followers to practice compassion and exhibit concern for their fellow beings especially for those

in distress and deprivation and to help them by giving a portion of their earnings in charity. Thus through the ages and in all parts of the world, the humanitarian impulses have marked the beginnings of social welfare.¹⁵

Indian social norms, values and codes of conduct prescribed in the scriptures and sacred texts, and as they have evolved through the ages, have enjoined not only the proper care of the elderly but also assigned to them a position of honour and authority in most matters connected with the family.¹⁶ Indian culture, like many other Asian cultures, emphasized filial piety. Parents were to be honoured as gods. It was considered a duty of a son to respect and care for his parents. Even today, old parents live with their sons and their families. However, the traditional family is fast disappearing even in rural areas. With urbanization, families are becoming nuclear, smaller and are not always capable of caring for older relatives. Yet older people are still cared for by their family.¹⁷

The prestige accorded to the old broadly depends on four components: Advisory, Contributory, Control and Residual. The first component comprises the greater experience of the old. The second arises from their participation in cultural, familial and economic activities. The control

¹⁵Sachdeva D.R., (2008) *Social Welfare Administration in India*, Allahabad: Kitab Mahal Agencies, p. 63.

¹⁶Bose A.B., Gangrade K.D., (eds) (1988) *The Aging in India: Problems and Potentialities*, New Delhi, Shakti Malik Abhinav Publications, p. 58.

¹⁷ Jai Prakash Indira, (1999) *Aging in India*, Geneva: Paper presented at the World Health Organization, p. 3.

component arises from their possession of property, practical knowledge and experience. What would be called the residual component depends on their previous status in their communities.¹⁸ But, this once widespread perception of the elderly as the repository of collective wisdom is on the wane. Being economically unproductive, they do not have the same authority and prestige as before; older people are now perceived as burdens.¹⁹

Urbanization, migration, the break-up of the extended family system, growing individualism, change in the role of women from being full-time careers, and increased dependency of the elderly may be a few. The changes in terms of education, aspirations and values, and availability of resources have contributed a lot to this decline. Consequently, the family is unable to meet the financial, social, psychological, medical, recreational and welfare needs of the aged, thereby creating need to look for other support sources.²⁰ Recently in India, technological developments have caused tremendous changes in the lifestyles and values of the younger generation. Their respect for and dependence on the old is reduced.²¹

¹⁸ Saxena D.P., (2006) *Sociology of Aging*, New Delhi: Concept Publishing Company, p. 2.

¹⁹ Kumar Anand, Anand Navneet, (2006) *Poverty Target Programs for the Elderly in India*, Background Paper For the Chronic Poverty Report, p. 24.

²⁰ Rao P. Madhava, "*Economic and Financial Aspects of ageing in India*", Paper presented at the International Institute on Ageing, UN, Malta, p. 6.

²¹ Saxena D.P., (2006) *Sociology of Aging*, New Delhi: Concept Publishing Company, p. 7.

In India, the position and status of the elderly and the care and protection they traditionally enjoyed have been undermined by several factors- urbanization, migration, breakup of the family system, growing individualism, change in the role of women from being full time carers to earners and increased dependency status of the elderly. There is also a generation gap in terms of education, aspirations and values, and the allocation of resources to different members of the family. Often, the family is unable to meet the financial, social, psycho, medical and welfare needs of the elderly and seeks help from supporting services.²² The problems afflicting the aged are multi- dimensional problems. They involve many aspects of national life. No single sector of national life is willing to accept the problem of old age as its own. Each sector is only too willing to pass the buck to another. Due to better health care and better standards of living, old age mortality has been reduced substantially.

Looking after the aged has been the responsibility of the family from time immemorial. Even in Mizoram, the family has always been the caregiver of the aged though the extent of care varies from family to family. In other words, the aged in Mizoram have always been taken care of by their families. Respect for the elders is one of the basic principles evolving out of '*Tlawmngaihna*'.²³ This concept has been embedded in the Mizo psychology since time immemorial. There are some sayings that reflect the honour and respect attributed to the old people. One of the sayings is '*Upa Sakah*' which means that special share /benefit is given just because he is older. For example in a hunting expedition two hunters fired at a wild animal

²² Krishnakumar Asha , *The Old and the Ignored*, volume 21, ISS :19.

²³ The Mizo term '*Tlawmngaihna*' means a high sense of moral duty towards fellow citizens, rendering service to the society and helping those in need .

and it was difficult to know which bullet hit the animal. In that circumstance, the advantage is given to the one who is older.²⁴ Before the advent of Christianity, the mizo who then considered themselves as a powerful militant group took great pride in subduing their rival tribes and raiding their neighbours.²⁵

In the traditional Mizo society, *Zawlbuk* was their cherished institution. It was a Bachelors Quarter or house in which all the male members of the Mizo community spend their nights. It was from here that the younger men learnt values and responsibilities and took instructions from the elders. *Zawlbuk* served multifarious purposes of the village. The younger people were given training to learn the social customs and traditional life and the village chief made good use of it for passing instructions and orders to the young men as to what he wanted them to do. The manpower being available to the village chief at one place for any kind of emergency was a great advantage not only to the chief but also to all the villagers.²⁶ It was from this institution that the principle of '*Tlawmngaihna*' was believed to have evolved.

In the past, to a great extent even now, in the Mizo community, old age (at least up to senility) has been associated with some special characteristics as an asset in its culture, such as usefulness in the

²⁴Lianzela, Vanlalchhawna (Eds.) (2007) *Aging in North East India: Magnitude of the Problems of Elderly Persons in Mizoram*, New Delhi: Akansha Publishing House,p. 15.

²⁵ Patnaik J.K.,*op.cit.*,p. 8

²⁶ Lalkima. C., (1997) *Social Welfare Administration in a Tribal State: A Case Study of Mizoram* , Assam, Spectrum Publications,p. 15

performance of chores, skill in certain arts and storytelling, control of property rights, power in the family, useful experience or extensive knowledge.²⁷ Thus, the older generations in Mizoram were held in high esteem and were looked to for advice and guidance.

Their authority on moral questions is highly respected and they are looked upon as preserver of tribal values and chivalry.²⁸ It may be mentioned here that though due consideration was given to the aged during the times of Zawlbuk and after, there was a transitional period during the 1940s- 1980s when elders were treated as a kind of useless commodity. The phrase '*tar chhia*' was also used commonly meaning useless old person. Younger generation would often pelt an aged person walking in the streets with small stones. This was not at so much at the familial level but at the societal level. However, the arrival of Christianity has done a lot to do away with this thinking though the process was slow. Christian teachings as well as education contributed to this process.

The Christian Missionaries came to Lushai Hills in 1894. They not only spread the Gospel but educated the masses. Various churches and institutions came into existence resulting in the decline of the Zawlbuk (Bachelor's dormitory) which was one of the most esteemed establishment among the Mizos. While the number of participants in schools and churches increased, the attendance in Zawlbuk met a drastic fall. The attempt of the Governor to bring about revival of the Zawlbuk institution had no significant outcome, thus the most valued institution came to a sad end. The Christian Missionaries wanted to keep the concept of '*Tlawmngaihna*' alive.

²⁷ Lianzela, Vanlalchhawna, op.cit.. p. 40.

²⁸ *Ibid.*, p. 42.

In the process of development of Christianity, in the closed Mizo society, the Welsh Missionaries and the Mizo Church leaders realised the need to mobilise the youth who were not so much involved in the main current of Christian development. On 5th June 1935, the Welsh Missionaries and the Mizo church leaders assembled in the residence of Missionary Miss K. Hughes at Mission Veng, Aizawl.²⁹ Thus it was in 1935 that the first voluntary organisation was formed in Mizoram in the form of Young Mizo Association, then Young Lushai Association. *Tlawmngaihna* became the watchword of the organization.

The church along with Young Mizo Association (YMA) and other organizations laid emphasis on inter alia, respect for elders. Songs about respecting elders and heeding their words have been composed and sung. The elderly people to this day are still given a special seating place in the Churches. Apart from the church and Young Mizo Association, the Christian Youth Organization (Kristian Thalai Pawl) was formed as an arm of the church administration. Then the formation of Mizo Women Organization (Mizo Hmeichhe Insuihkhawm Pawl) took place in 1946 followed by Mizoram Senior Citizens Association (Mizoram Upa Pawl) in 1957. Till the attainment of Union Territory status by Mizoram (21st Jan 1972) the close knit Mizo society continued her own way of life with its in-built voluntary organizations for the relief of those in need or in distress.³⁰

Initially, Social Welfare activities in Mizoram began under the jurisdiction of Department of Education. It was called Education and Social Welfare Department at the time (1973-1974). During 1980-1981, a separate

²⁹ *Ibid.*, p. 38.

³⁰ Lalkima C, *op.cit.*, p. 61.

Department of Social Welfare was set up and was declared a fully fledged Directorate in 1983. During this time, the Social Welfare Department was entrusted with the following functions:

- (1) Welfare of women and children.
- (2) Welfare of the handicapped persons which includes economic rehabilitation, prosthetic aids to physically handicapped persons and their training for income generating trades.
- (3) Grants-in-aid to voluntary organizations.
- (4) Homes for orphans.
- (5) Welfare of poor and destitute.
- (6) Implementation of Children's Act, Immoral Traffic in Women and Girl's Act and such other social security schemes.
- (7) Integrated child development services and functional literacy for adult women.
- (8) Components of health, nutrition and non-formal education of children below 6 years and pregnant and nursing mothers.

The notion of welfare of the Aged means taking care of the aged in terms of social insurance or public assistance schemes or institutional care. It was during 1974-1975 that welfare towards the aged started in the form of old age pension. During this time, the State Pension Scheme was given to one hundred and fifty beneficiaries at the amount of Rs 30/- per month.

The second step taken towards welfare of the aged in Mizoram was the opening of the first Old Age Home on 1st Feb 1989. However, it may be mentioned that living in old age homes is not popular in Mizoram due to the

fact that it is a close knit society. Putting our beloved parents would amount to sever criticism from the society and family network.

The next step taken towards welfare of the aged was on 15th August 1995 when the Government of India announced a new programme called National Social Assistance Programme. During this time, the National Social Assistance Programme consisted of only three components: National Old Age Pension Scheme, National Family Benefit Scheme and National Maternity Benefit Scheme. The present components of National Social Assistance Programme are Indira Gandhi National Old Age Pension Scheme, Indira Gandhi National Widow Pension Scheme, Indira Gandhi National Disability Pension Scheme, National Family Benefit Scheme and Annapurna Scheme. National Maternity Benefit Scheme has been transferred to the Ministry of Health and Family Welfare to become a part of the Population Stabilization Programme. The National Social Assistance Programme is a programme administered by the Ministry of Rural Development but in most of the States including Mizoram, it is being implemented by the Social Welfare Department.

In Mizoram, welfare policy for the aged was drafted in 2003. It is called State Policy for Older Persons. In recognition of the value of older persons, 1st October 2010 has been declared as Older Persons Day in Mizoram. The Policy provides for the establishment of a State Council for Older Persons. The 60+ population are the senior citizens and they constitute a precious reservoir of human resource due to their knowledge, experiences and deep insight. It is necessary to give utmost importance to the welfare of our aged population.

CHAPTER-III

PROGRAMMES, SCHEMES AND FACILITIES AVAILABLE FOR THE AGED AND THEIR IMPLEMENTATION

In India, the Ministry of Social Justice and Empowerment is the nodal agency to look into the welfare of its citizens including that of the aged. The National Policy for Older Persons was passed in 1999; its main thrust is to promote the financial security, health care and nutrition, shelter and welfare of senior citizens in India. It recognises persons aged above 60 as senior citizens. It seeks to assure older persons that their concerns are national concerns and they will not live unprotected, ignored and marginalized. The National Policy aims to strengthen their legitimate place in the society and to help older people to live the last phase of their life with purpose, dignity and peace. The National Policy on Older Persons also visualizes support for financial security, health care and nutrition, shelter, emphasis upon education, training and information needs, provision of appropriate concessions, rebates and discounts etc. to senior citizens and special attention to protect and strengthen their legal rights such as to safeguard their life and property.

The year 2000 was declared by the Government of India as the National Year of Older Persons. To foresee the implementation of the National Policy on Older Persons, the National Council for Older Persons has been set up. It consists of representatives of the Central and State Governments, Planning Commission, Non Governmental Organisations

(NGOs) and experts from various fields. The National Council for Older persons is under the chairmanship of the Union Minister of Social Justice and Empowerment. It consists of 49 members. It is the apex advisory body concerning welfare of the aged. Apart from the National Council for Older Persons, there is also an Inter Ministerial Committee consisting of 22 Ministries or Departments and representatives of State Governments and Union Territory administrations. Its main role is to ensure effective implementation of the National Policy on Older Persons. It is also responsible for implanting the recommendations of the National Council for Older Persons.

A seven member working group has also been instituted from amongst the members of the National Council for Older Persons. The basic objectives of the National Council for Older Persons are to advise the Government on policies and programmes for older persons; provide feedback to the Government on the implementation of National Policy on Older persons as well as on specific programme initiatives for older persons. It also provides lobby for concessions, rebates and discounts for older persons both with the public sector and corporate sectors.

The National Institute of Social Defence is an autonomous body which exists under the Ministry of Social Justice and Empowerment. It has launched a National Initiative on Care of the Elderly (NICE) back in 2000. The National Institute of Social Defence conducts geriatric care courses every six months in several regions of India. The main purpose is to create awareness to caregivers of the specific physical and psychological conditions of the elderly. Emphasis is laid on the importance for all

caregivers to be aware of the implications and the multi dimensional aspects of the care of the elderly. The project also includes skill building programmes in different regions to capacitate the Non Governmental Organization functionaries and to generate awareness and capacitate senior citizens through outreach programmes and computer training to minimize the generation gap.

Since 1983-1984, the Ministry of Social Justice and Empowerment has been entrusted to give financial assistance to voluntary agencies to provide services to the aged. An integrated programme for older persons has also been formulated by revising the earlier scheme of assistance to voluntary organizations for programmes relating to welfare of the aged. Under the scheme, the Ministry of Social Justice and Empowerment provides financial assistance to NGOs, Educational Institutions, Autonomous Bodies, Co-operative Societies etc. Up to 90 percent of the project cost is borne by the Ministry for setting up and maintenance of Day Care Centres, Old Age Homes, Mobile Medicare Units and Non Institutional Services for the aged. The remaining 10 percent is to be borne by the concerned NGO.

There is another scheme called the scheme of assistance to Panchayati Raj Institutions / voluntary groups / self help groups for construction of old age homes / multi service centres for older persons. The scheme has been revised to enhance the one time construction grant for old age homes/ multi service centres from Rs 5 lakhs to 30 lakhs to eligible organizations. The Ministry of Social Justice and Empowerment has also launched a project called Old Age Social and Income Security (OASIS). An

expert Committee has been constituted and its recommendations are being examined by the Ministry of Finance for further action.

Apart from the Ministry of Social Justice and Empowerment, there are various Ministries and Departments catering to the welfare of the aged. Until 1995, there was no social assistance program managed by the Government of India for its poor citizens though many state governments run social assistance programs for the old and vulnerable sections of the society. The announcement, on 15th August 1995 of a National Social Assistance Scheme (NSAS) was a significant step towards the fulfilment of the Directive Principles in Article 42 of the Indian Constitution.³¹

There are three components of National Social Assistance Scheme: National Old Age Pension Scheme (NOAPS), National Family Benefit Scheme (NFBS) and National Maternal Benefit Scheme (NMBS). National Old Age Pension Scheme is meant for the aged. This is a Centrally Sponsored Scheme (CSS) with 100 percent Central assistance to States and Union Territories in accordance with the norms, guidelines and conditions laid down by the Central Government with the Ministry of Rural Development.

Since 2006-2007, the National Old Age Pension Scheme was renamed as Indira Gandhi National Old Age Pension Scheme. The amount of pension has been increased from Rs 75/- to Rs 200/- per person per month. Under the National Family Benefit Scheme, assistance of Rs

³¹ Rajan S Irudaya, Mishra U.S., Sharma P.S., (1999) *India's Elderly: Burden or Challenge?* ,New Delhi: Thousand Oaks, London Sage Publications, p. 52.

10,000/- is given to a bereaved family in case of death of the head of the household who is 64 plus and is the only bread winner in the family.

Since March 1999, a new scheme called Annapurna has also been initiated by the Government of India. Under this scheme, food grains up to 10 kilos per month are provided free of cost to persons above 65 years and who are destitute. This Scheme is given through the Public Distribution System. This Scheme is launched by the Ministry of Rural Development with the assistance of the Ministry of Food & Civil Supplies.

From 2002, along with the National Social Assistance Programme, the Annapurna Scheme has been transferred to the State Plan. The funds for these are being released by the Ministry of Finance as Additional Central Assistance to the State Plan. The State Government makes final decisions regarding the choice of beneficiaries and implementation. The food grains are released to the State Governments at BPL rates.

Ministry of Finance under the Income Tax Act, 1961 under section 88 B provides for the benefit of the senior citizens above the age of 65 years. There is income tax rebate up to an income of Rs 1.85 lakh per annum. Under Section 80 D, there is deduction in respect of medical insurance premium at the maximum amount of Rs 20000/-.

Different banks of India have adopted Senior Citizens Savings Scheme. Rate of interest is 9 percent per annum. The frequency of computing interest is quarterly. The maturity period is 5 years but it can be extended to three more years. Interest is fully taxable. Persons above 60 years are eligible. Government servants above 55 years who have gone on

voluntary retirement can also avail of the Scheme within 3 months of their retirement. At present, 24 nationalized banks and one private sector bank are authorized to handle the SCSS, 2004. It may be noted that only designated branches of these banks have been authorized to handle SCSS, 2004.

The Ministry of Health and Family Welfare has issued directions to all the State Governments to arrange separate counters for the senior citizens in Hospitals for registration and medical examination. The National Programme for Health Care of the Elderly is an articulation of the international and national commitments of the Government of India as envisaged under the United Nations Convention on the Rights of Persons with Disabilities, National Policy on Older Persons adopted by the Government of India in 1999 and Section 20 of the Maintenance and Welfare of Parents and Senior Citizens Act 2007 dealing with provisions for medical care of senior citizens.

The main objectives of the National Programme for Health Care of the Elderly are to provide preventive, curative and rehabilitative services to the elderly persons at various level of health care delivery system of the country. Other objectives are to strengthen referral system, to develop specialized man power and to promote research in the field of diseases related to old age.

The Ministry of Civil Aviation has directed different airlines to give special concessions to the aged. For example, in Indian Airlines, there is provision of 50 percent discount for senior citizens on economy class for all domestic flights. Males above 65 years and females above 63 years are eligible. This concession is subject to certain restrictions. Sahara Airlines is

giving 50 percent discount is available for all domestic flights in economy class. Senior citizens above 65 years are eligible. Air India is offering 45 percent discount to senior citizens above 60 years for all domestic flights as well as international flights to USA, UK and Europe. Jet Airways also provides that Senior citizens above 65 years are entitled to 50 percent discount on basic fare for all domestic flights in economy class.

Ministry of Railways provides 30 percent concession on rail fare for persons above 60 years by the Indian Railways in all mails including Rajdhani. They also provide separate counters for senior citizens for purchase, booking and cancellation of tickets. Senior citizens with heart problems are given 75 percent concession in class I, II and sleeper class.

Ministry of Law and Justice has also given directions to serve the aged. The Hon' Chief Justice of India, on the request of the Ministry of Social Justice and Empowerment, has advised Chief Justices of all High Courts to accord priority to cases involving older persons and ensure their expeditious disposal.

The Maintenance and Welfare of the Parents & Senior Citizens Act was passed on 6th Dec 2007 advocating the rights and entitlements of senior citizens. Thus the National Policy for Older Persons has been backed with legal enactment. Clause 5(1) of the Act holds that a senior citizen may apply for maintenance under clause 4 of the bill. The Act will be enforced by the State Government and the date on which the Act will come into force in the States will be notified by the State Government concerned in the Official Gazette.

The Ministry of Shipping, Road Transport and Highways provides for reservation of two seats for senior citizens in the front row of the State Road Transport Undertakings.

Keeping in view the changing demography in the country, the Ministry of Social Justice and Empowerment constituted a Committee to assess the present status of various issues concerning senior citizens in general, implementation of National Policy on Older Persons, 1999 and to draft a new national policy on older persons in particular. The Committee submitted its report in March 2011. According to the draft National Policy for Senior Citizens 2011, the overall population in India will grow by 55 percent whereas population of people in their 60 years and above will increase by 326 percent and those in the age group of 80+ by 700 percent, the fastest growing group. The main thrust of the draft policy is to promote the socio economic, financial, health and shelter of the rural and urban aged especially the oldest old (80+), women and the rural poor.

Both the Central and State Governments in India have taken up the responsibility to take care of the aged and have started certain schemes to provide care and support for the aged. There are also some Non-Governmental Organisations (NGOs) which have undertaken the work of taking care of the aged. However, it is still the family that plays the most important role in India in this respect. To a large extent, due to industrialization and modernization, changes have been brought about to the Indian family structure.

In the administrative set up of Mizoram, there is a Social Welfare Department which provides social welfare services. The Social Welfare

Department has been entrusted amongst others, with the task of promoting the welfare of the aged. To ensure effective implementation of the National Policy on Older Persons, at the State level, the State Policy for Older Persons was prepared by the Social Welfare Department, Government of Mizoram in 2003. The Policy also provides for the establishment of a State Council for Older Persons. In recognition of the value of older persons, 1st October 2010 has been declared as Older Persons Day in Mizoram.

THE STATE POLICY FOR OLDER PERSONS 2003

Following is the State Policy for Older Persons passed by the Government of Mizoram, Social Welfare Department.

I. State Council for Older Persons (SCOP)

Instituting the State Council for Older Persons with the Chief Minister as the Chairperson of the Council assumes the first policy.

II. The State Policy for Older Persons (SPOP) has been formulated thus:

III. Psycho-Social:

- a) The Social Defence Branch of the Social Welfare Department is entrusted and specially assigned to deal with matters concerning the needs and welfare of older persons.
- b) Making uniform age of 60 for extending concessions.

- c) To enumerate the age of 60 years and above from the electoral list and to acknowledge the EPIC cards as confide proof for senior citizens identification.
- d) Taking every possible step for the security of older persons by the Government and especially the community based organizations.
- e) To teach the younger generation to acknowledge and celebrate the value of old age.
- f) To propagate and encourage the family as the primary caregivers for the aged.
- g) Suitable projects should be formulated for older persons whereby they would be in a position to utilize their knowledge, wisdom and talent and to encourage them to work where they are.
- h) To set up old age home and recreational complexes in every District from available resources of the State and Central Governments.
- i) A scheme for excursion for senior citizens to be formulated to enable them to see places of importance within the State and the country.
- j) To allow for concessional rates in Mizoram Houses and Government accommodation for older persons.

- k) To encourage and assist the elders- especially of the age group of 60-70 years to organize their pool of human resources discipline wise, with a view to utilize their knowledge and experience for the advancement and benefit of the younger generation. (Example: Tutorial Institutions by the education discipline resources groups would go a long way in up-gradation of merit of students with potential for meritorious performance especially for the poorer sections of the society.)
- l) To introduce a subject in the college and university curriculum regarding “Ageing” with a view to understand the perspective of aging academically and built up a wealth of data and studies which would serve to be a valuable resource for the planning process of the State Government.

IV. Health Sector:

1. Transit accommodation for the older persons who come to Aizawl and Lunglei for medical treatment;
2. Setting up a hospice for terminally ill and cancer patients. This is to be taken up by the nodal department on a project mode;
3. Organize free mobile clinic for the elderly in every District of Mizoram. Geriatric Ward to be opened in Civil Hospitals.
4. Seminar and awareness programs should be organized to acquaint the elderly of the common ailments and diseases that befall them and are prone to;

5. Concessions to be extended for older persons in respect of medical consultation fees. This should however be determined by their income bracket.

V. Economic Empowerment:

1. The State Government to take initiative for full coverage of old age pension in the State and raising the amount of old age pension from the existing rate.
2. Introduction of income generating schemes for senior citizens sourced from both State and central funding.
3. To impress upon the nationalized banks to offer assistance in fostering savings with a special focus on the welfare of the senior citizens as well as for the citizens at large with a view to inculcate the need to save for the evening of their lives.
4. Steps to be taken with the active participation of the Financial Institutions and Banks not only to encourage savings but to educate the elders on the scope of availing loans.
5. To seek the active participation of the various insurance companies to educate the elders on the merits of availing suitable policies for the aged.
6. Special dispensation for the deprived aged in availing of Housing Loans and residential house site allotment by the Government.
7. The nodal department should facilitate the convergence of various and centrally funded schemes for the benefit of the elder citizens. Special reservation should be made with

proportionate percentage reservation of the budget against various developmental schemes, e.g SGRY, Housing, Welfare, and other development department etc for the elderly.

VI. Transportation (mobility):

1. Concessions to be made for the older persons in MST buses, City buses and Town buses.
2. To utilize the voter ID card for concessions in MST buses, Town buses and City buses.

VII. Legal Provisions

The foundation of legal protection for older persons is inherent in the Fundamental Rights of the Constitution. With special reference to the older persons, there are a number of statutory provisions that affirm the protection of their rights. For instance, there is the Code of Criminal Procedures, 1973 Section 125 which inter alia, guarantees the safeguard for the older persons whereby if the children are not willing to take care of their aged parents, they can be taken to court.

The state government should set up special cells to cater to the legal needs and advice of the elderly especially in upholding their rights- e.g. property matters, inheritance issues, and other financial related issues and disputes, legal education on writing of will and other documentation.

VIII. Other Self Actualisation Measures

Media exposures and special programs: Special forums e.g. discussions in T.V. programs, and topical talks on various categories of events and issues which may be cultural, social, political, historical etc. These may be facilitated in ARDD and other local channels and media.

IX. Multi Sectoral Intervention:

1. All departments must be impressed to be prompt in settling the terminal claims of their retiring functionaries.
2. All departments to be advised to set aside a special welfare fund from out of their budget for the aged. The rationale behind this being that the welfare of the aged is a multi- sectoral responsibility and that each department should contribute in the welfare activity of the elderly persons in society.
3. Non –developmental departments also have equally important part to play in the welfare of the elderly. For instance, the Accounts and Treasury Department may organize Pension (Adalats) Court as is practised in some larger States of the country. These adalats are highly laudable intervention, which are basically meant to be a fast track redressal camp/ programme for pensioners.

ACTION ARISING OUT OF THE STATE POLICY FOR OLDER PERSONS:

The State Government through the nodal department i.e. Social Welfare Department shall draw up a comprehensive State Action Plan, The Action Plan which will emerge from the above stated policy for older

persons will set out clear goals both long and short term. The affirmative centres, which will unequivocally spell out the various roles assigned to the various wings and departments of the state government and also to the banks, insurance agencies, other financial institutions, NGOs and community based organizations etc as well.

ACTION PLAN FOR OLDER PERSONS

The Action Plan for older persons has been formulated by the Government of Mizoram, Social Welfare Department. The Plan may be highlighted as under-

Introduction

The various problems faced by the older persons is not restricted to their age group only but also affects the society as a whole. These various issues and problems faced by the older persons have now become a major social concern demanding the attention of National and State Governments as well as the NGOs and civil society. In 1951-1960, life expectancy in India was around 42 years and in 1981-1990; it shifted to 58 years and by 2011-2016 AD, it is expected to reach 67 years. As life expectancy increases the 60+ population had reached 60 million. This shows the magnitude of this social problem.

In order to tackle this problem, the responsibility falls upon the State Government and NGOs. Different steps have been proposed in order to solve the problem of older persons. In Mizoram, since there are no proper data regarding the exact population of older persons, it is extremely

necessary to conduct a proper survey to begin with in order to acquire the required data and information. In our State, the older persons have formed an association called Mizoram Upa Pawl, which is the biggest association for older persons in Mizoram. While this association has more than 50,000 members all over the State, yet there are 60+ year persons who are not enrolled as members of this association. It may therefore, be noted that the 60+ population occupies a significant part of our total population. With the development in the fields of health and medicine we can also assume that there is a growth in the 60+ population. Therefore it is necessary for the Government and other NGOs to take initiatives in these areas for the welfare and health of the people above 60 years.

In order to carry out these initiatives, the State Government has approved of the State Policy for Older Persons. This State Policy attempts at preserving the well being of older persons and suggest on how the Government should proceed in making initiatives or incentives for them in different areas. The State Policy's main aim is to develop the different fields of interest in favour of the older persons. For the success of this Policy an Action Plan has to be formulated. The various efforts that has to be taken by the Government and other groups will be included in the Action Plan. Having formulated this Action Plan we have to keep in mind that the achievement on the objectives set forth in the Plan would largely be contingent on the availability and mobilization of resources with the State Government.

I. State level Committee for Older Persons (SLCOP) :

Composition of the State Level Committee for Older Persons shall be constituted by the State Government under the Chairmanship of Honourable Minister for Social Welfare with the following members:

1. Secretary, Social Welfare Department – Vice Chairman
2. Director, Social Welfare Department – Member-Secy
3. President, MUP Hqrs, Mizoram - member
4. Gen Secy, MUP Hqrs, Mizoram - member
5. President, Civil Pensioners Assn - do
6. President MHIP - do
7. Chairperson, MSWB - do
8. Director, Health & Family welfare - do
9. Director, Transport Dept - do
10. Director, RD Dept - do
11. Director, Art & Culture Dept - do
- 12...Director, I&PR Dept - do
13. Saingenga, Chanmari - do
14. Rualzakhuma, IAS (Rtd) - do

Terms of Reference of the Committee:

1. The Committee shall device criteria and indicators for monitoring the implementation of the SLCOP.
2. To advice the State Government on policies and issues relating to old age.
3. The Committee shall meet once every six months.
4. The tenure of the Committee shall be 3 years.

II. Psycho-Social:

- a) For the upliftment of the life of the aged, a demographic profile of 60 years and above is necessary. For this, survey of 60 + must be done. In this survey, the services of Village Councils with concerned / reliable NGO's such as MUP, YMA should be utilized.
- b) The State Government and Community Based Organizations should take every possible step for the security of older persons in the State.
- c) To teach the younger generation to acknowledge and appreciate the value of old age. For this, training of trainers for sensitization of caregivers be organized by the Social Welfare Department in collaboration with the National Institute of Social Defence.
- d) To propagate and encourage the family as the primary caregivers for the aged.
- e) To encourage and assist the elders especially of the age group of 60-70 years to organize their pool of human resources discipline wise , with a view to utilise their knowledge and experience for the advancement and benefit of the younger generation. For this, a project should be started on School after School (e.g. tutorial classes) where young old could be used as resource persons. This should be made on a project mode.
- f) To set up old age home and recreational complexes in every district from available resources of the State and Central Government.
- g) Mizoram University should be urged that a subject on Gerontology be included in their curriculum.
- h) Proposal should be made that at least two teams of older persons be included in the Programme of Tribal Exchange in which excursions

are organized to different parts of the country. For intrastate excursions for older persons responsibility should be placed by the State Governments to all State Developmental Departments. These Departments should plan to organize excursions for older persons within the State at least once a year with all the expenses borne by them.

III. Concessions and Allowances:

- a) The State Government should allow concessional rates in Mizoram Houses and Government Accommodations for older persons. For this, request may be made to the State Government.
- b) Concessions to be extended to older persons in respect of Medical Consultation fees. This should, however, be determined by their income bracket. E.g. for BPL families only.

IV. Health Sector:

- a) If the economic capacity of the State allows, transit accommodation for the older persons who come to Aizawl and Lunglei for treatment should be built /established.
- b) To organize free Mobile Medical Clinic for the elderly in every District of Mizoram. Both the Government and BDO's may be involved in this program from resources drawn from the Centre and the State.
- c) If there is fund available with the State Government, Geriatric Ward to be opened in Civil Hospitals.

- d) Seminars and awareness programs should be organized to acquaint the elderly of the common ailments and diseases that befall them and prone to.
- e) Annual calendar of such programs may be drawn in consultation with Health Department and MUP.

V. Nutrition:

Depending on the availability of resources, nutritional needs/supplementary nutrition should be provided to selected/needy older persons. For this a proposal may be submitted to the State Government for supplementary diet/nutrition for the older persons in the State.

VI. Economic Empowerment:

- a) The State Government should take initiative for full coverage of Old Age Pension in the State and raising the amount of old age pension from the existing rate if the State Government is financially capable to do so.
- b) Introduction of income generating schemes for senior citizens sourced from both State & Central funding Projects may be formulated from either State or Central resources.
- c) To impress upon the nationalized banks to offer assistance on fostering savings with a special focus on the welfare of the senior citizens as well as for the citizen at large with a view to inculcate the need to save for the evening of their lives.

- d) Steps to be taken with the active participation of the Financial Institutions & banks not only to encourage savings but to educate the elders on the scope of availing loans.
- e) To seek the active participation of the various Insurance Companies with a view to educate the elders on the merits of availing suitable policies for the aged.

VII. Transportation:

- a) Concession to be made for older persons in Mizoram State Transport buses, city buses and town buses.
- b) To utilize the voter's D card for concessions in Mizoram State Transport buses, town buses and city buses

VIII. Legal Provisions:

The State Government should set up Legal Grievances Cell which will deal legal matters only and advise of the elderly especially in upholding their rights- e.g. property matters, inheritances issues and other financial related issues and disputes, legal education on writing of will and other documentation etc. This cell will hold its durbar once in every three months.

IX. Self Actualization Measures:

Media exposures and special programmes, special forums e.g. discussions in T.V. programs and topical talks on various categories of events and issues which may be cultural, social, political, historical etc. These may be facilitated in AIR, DD and other local channels and media.

X. Multi Sectoral Intervention:

- a) All departments must be impressed to be prompt in settling the terminal claims of their retiring functionaries.
- b) All departments to be advised to set a special welfare fund from out of their Budget for the aged. The rationale behind this being that the welfare of the aged is a multi-sectoral responsibility and that each department should contribute in the welfare activity of the older persons in society.
- c) The Accounts & Treasury Department may organise Pension (Adalats) Court as is practised in some larger states of the country. These Adalats are highly laudable intervention, which are basically meant to be a fast track redressal camp/program for pensioners.
- d) Integrated Programmes for Older Persons should be encouraged.

Implementation of Welfare Schemes in Mizoram

In Mizoram, the Social Welfare Department was created as a small wing under the Education Department during 1973-1974 with one State Social Welfare Officer, one District Social Welfare Officer and a few supporting staff. With the expansion of its activities and programmes, the Social Welfare Wing was upgraded to a full fledged Department (Directorate) of Social Welfare during the financial year of 1980-1981. At present, it has more than 500 staff belonging to different grades. It is headed by a Director. The Deputy Director (Establishment) is the overall in charge of welfare of the aged.

In the field of social welfare, the entire state of Mizoram has been divided into four (4) Districts, mainly, Aizawl East District, Aizawl West District, Lunglei District and Chhimtuipui District. The District Social Welfare Officer of Aizawl East covers the entire Aizawl District Eastern part, Champhai District and Serchhip District. The District Social Welfare Officer of Aizawl West covers the entire Aizawl District Western part, Kolasib District and Mamit District. The District Social Welfare Officer of Lunglei District covers the whole District of Lunglei. The District Social Welfare Officer of Chhimtuipui District covers the whole District of Chhimtuipui District undivided, i.e. Lawngtlai and Saiha District.

The main role played by the Social Welfare Department for the welfare of the aged is in terms of old age pension and maintenance of old age home.

Old Age Pension

In keeping with the constitutional mandate of India, several states including Mizoram have ongoing schemes for providing pension for elderly persons. The scheme of Old Age Pension (State Scheme) was started during 1974-1975 in Mizoram. It was given to one hundred and fifty (150) persons @ Rs 30/- per person per month who have neither supporters nor relatives to support them. It was increased to Rs 60/- per month in 1981-82. From 1993-1994, the amount was increased to Rs 100/- a month according to official records.

To supplement the efforts of the State Government, on 15th August 1995, the 47th anniversary of India's Independence, the Prime Minister of

India announced a new programme called National Social Assistance Programme. It is a social assistance programme for the poor households. During this time, the National Social Assistance Programme consisted of only three components: National Old Age Pension Scheme, National Family Benefit Scheme and National Maternity Benefit Scheme. The present components of National Social Assistance Programme are Indira Gandhi National Old Age Pension Scheme, Indira Gandhi National Widow Pension Scheme, Indira Gandhi National Disability Pension Scheme, National Family Benefit Scheme and Annapurna Scheme. National Maternity Benefit Scheme has been transferred to the Ministry of Health and Family Welfare to become a part of the Population Stabilization Programme. The National Old Age Pension Scheme is intended for the aged living below the poverty line. During 2005-2006, the amount of pension increased to Rs 125/- per month i.e. Rs 75/- from the Centre and Rs 50/- from the State Government.

Since 2006-2007, the National Old Age Pension Scheme was renamed as Indira Gandhi National Old Age Pension Scheme. The amount of pension was also increased from Rs 75/- to Rs 200/- per person per month. The amount supplemented by the State Government remains the same i.e. Rs 50/- per person per month though the Central Government stipulates equal amount to be given by both Centre and States. Thus the total amount of pension paid to each beneficiary is Rs 250 per month. According to Statistical Handbook, Mizoram 2010, during 2008-2009 the total number of beneficiaries of National Old Age Pension was 15,516. The number increased to 23,747 during 2009-2011. In the study area, i.e. Aizawl District, the total number of beneficiaries of Indira Gandhi National Old Age Pension at the time of study was 5713 according to official records. Out of this, 3085

beneficiaries are receiving Rs.250/- per month. The remaining 2628 beneficiaries are receiving Rs.200/- per month. The difference in amount is due to the fact that the former are getting an additional support from the State Government at the amount of Rs.50/- per beneficiary. The additional cannot be given to the latter group due to paucity of funds. The pension is also not paid every month and is usually given in arrears as soon as money is sanctioned by the Government.

The eligibility age of beneficiaries to this scheme has been reduced from 65 years to 60 years and above belonging to a household below the poverty line according to the criteria prescribed by the Government of India. For BPL beneficiaries above 80 years, the pension amount has also been raised to Rs.500/-. The move came into effect from 1st April 2011. For those below 80 years i.e. 60-79 years of age, the pension amount remains Rs 200 per month.

Identification and selection of beneficiaries: Application forms can be obtained from the office of the District Social Welfare Officer or the concerned Child Development Project Officer. All the Applicants are screened by the recommending body at the village level such as the Village Council, Young Mizo Association, Mizoram Upa Pawl (Senior Citizens Association) and Mizoram Hmeichhe Insuihkhawm Pawl (Mizoram Women's Association). This is done under the supervision of the concerned Child Development Project Officer. The concerned Child Development Project Officer then forward the list of selected applicants to the District Social Welfare Officer. The actual selection of beneficiaries is done by the District level Committee headed by the Deputy Commissioner of the District

who is also the sanctioning authority. A person may receive his/her pension after production of a life certificate signed by Village Council President or Mizo Upa Pawl in the prescribed form. Life certificate must be submitted to the concerned CDPO twice a year. The Scheme envisages that all payments be made through the Bank Account of the beneficiary or it should be sent through postal money order.

Institutional Facilities (Old Age Home)

There is only one Old Age Home in Aizawl District. At first, the Home was located in Mission Veng. It was set up on 1st Feb 1989 and was the second step taken towards welfare activities for the aged. This Home was shifted to Durtlang occupying a house with an area of approximately 60ft x 36ft. The Department constructed the building with a capacity of 25 inmates. But on 4th April 1992 there were only 9 inmates at the Home.³² The Old Age Home was again shifted to Government Complex, Luangmual. It is a small home and the intake capacity is only ten. At present, there are only four inmates. Initially, it was set up as a dormitory type but later on changes were made to accord more privacy to the inmates. One room is reserved for a female inmate which has been vacant since 2009. Two rooms are set aside for the males. At present there are 4 male residents in this Home, two sharing each room. The four inmates are of different age groups; 87, 78, 69 and 64. All three except one were in good physical and mental health.

³² Lalkima. C., (1997) *Social Welfare Administration in a Tribal State: A Case Study of Mizoram*, Assam, Spectrum Publications, p. 80.

The home is residential in nature. There is an attached kitchen and free food is provided to the inmates. Entertainment is available in the form of television with cable connection, carom board, radio, newspapers and books. They attend Sunday School in the local Church and are very fond of going to feasts organised by the local people during times of weddings and festivals.

At present, the Old Age Home is under the supervision of a caretaker. There is also a warden assisted by four IVth grades who takes care of cooking, sweeping, mopping, washing, cleaning etc. They also take turns to spend the night. Application for admission to the Old Age Home is submitted to the Director of Social Welfare Department.

The eligibility criterion is that all applicants must be destitute above 60 years and permanent residents of Mizoram. Admission is done only after spot verification and interview by Departmental Officer. Applicants are also checked to see if they have any communicable diseases and if they do they may be denied admission to the Home.

There is a full time nurse who takes care of their health needs and in case of severe illness there is also a Medical Officer who attends to them. Inmates who require Hospitalization are often admitted to the nearest Hospital or Civil Hospital. All necessary expenditure regarding medicines, hospitalization etc is borne by the concerned Department. When the inmates die, they are usually buried in the local cemetery if nobody claims their bodies.

Apart from the above mentioned role of the Social Welfare Department, another Central scheme is being implemented by the Food and Civil Supply Department. It is called Annapurna Scheme.

Annapurna Scheme

Annapurna Scheme was launched on 1st April 2000 by the Ministry of Rural Development. The aim of this Scheme is to provide food security to meet the requirement of those senior citizens who, though eligible, have remained uncovered under the National Old Age Pension. In Mizoram, this Scheme is implemented through the Department of Food and Civil Supply Department. Under this Scheme, 10 kilos of rice are distributed free of cost to destitute above 65 years every month. The mode of distribution is through fair price shops. The selection of beneficiaries is done by the District Civil Supply Officer in collaboration with the Village Council. Due to State wise allotment of food grains and the total allotment for the State of Mizoram being 258.30 Quintals, the total number of beneficiaries of Annapurna Scheme is 2583. Out of 2583 beneficiaries of Annapurna Scheme in the whole of Mizoram, 653 are from Aizawl District. They get ten kilos of rice every month free of cost through the public distribution system.

The Department of Health and Family Welfare often organises free clinics to cater to the health needs of the aged. There are programmes which cater for the health of the elderly citizens like the National Programme for

Control of Blindness, under which sight is restored through cataract operations.³³

There are other concessions and rebates available for the aged in Mizoram. For example, in Sahara Airlines, there is provision of 50 percent discount for senior citizens on economy class for all domestic flights. Males above 65 years and females above 63 years are eligible. This concession is subject to certain restrictions. In Indian Airlines, 50 percent discount is available for all domestic flights in economy class. Senior citizens above 65 years are eligible. Air India is offering 45 percent discount to senior citizens above 60 years for all domestic flights as well as international flights to USA, UK and Europe. Jet Airways gives senior citizens above 65 years are entitled to 50 percent discount on basic fare for all domestic flights in economy class.

Apart from these, 30 percent concession on rail fare is provided for persons above 60 years by the Indian Railways in all mails including Rajdhani. They also provide separate counters for senior citizens for purchase, booking and cancellation of tickets. Senior citizens with heart problems are given 75 percent concession in class I, II and sleeper class.

The Transport Department, Government of Mizoram is giving 50 percent concession in Mizoram State Transport buses. All persons above 65 years are eligible on production of proof of age or age certificate.

³³ Lianzela, Vanlalchhawna, (eds) (2007) *Aging in North East India: Magnitude of the Problems of Elderly Persons in Mizoram*, New Delhi: Akansha Publishing House, p. 64.

The Senior Citizens Savings Scheme at the rate of interest of 9 percent per annum is also available in the Post Office, State bank of India, Central Bank of India, United Commercial Bank. The frequency of computing interest is quarterly. The maturity period is 5 years but it can be extended to three more years. Interest is fully taxable. Persons above 60 years are eligible. Government servants above 55 years who have gone on voluntary retirement can also avail of the Scheme within 3 months of their retirement.

Life Insurance Corporation is providing the following schemes like Jeevan Akshay, Bima Bhachat and pension plus, among others. Jeevan Akshay VI is a pension scheme with immediate annuity plan. It provides for fixed amount of pension through life with an option of payment of purchase price on death of the annuitant. Pension can be had either monthly, quarterly, half yearly or yearly. Once fixed it is fixed for life. Persons between the age group of 40-79 years can avail of this scheme. Bima Bhachat table no 175 provides for survival benefit payment after every three years at the rate of 15 percent of sum assured. It is available for terms of 9 years, 12 years and 15 years. The minimum single premium is Rs.20000. there is no upper limit. The entry age is 15 years to 66 years. Pension Plus is a unit linked deferred pension plan. Premiums can be paid monthly, quarterly, half yearly or yearly. It does not have a life cover. Minimum entry age is 18 years and maximum is 75 years.

The Maintenance and Welfare of Parents and Senior Citizens Act 2007 has been notified by the Government of Mizoram in the official Gazette No.H.12017/55/07-LJD the 7th May, 2008 for general information.

This Act aims to provide need based maintenance to the parents from their children. Tribunals will be set up to provide time bound maintenance settlements to parents. The Act also provides for protection of life and property of senior citizens, better medical facilities, and setting up of old age homes in every District.

The major hindrances faced in implementation of the welfare schemes are due to paucity of funds and lack of prompt sanctioning of funds. Welfare schemes for the aged in Mizoram come mainly in the form of National Old Age Pension Scheme and Annapurna Scheme. The pension is also not paid every month and is usually given in arrears as soon as money is sanctioned by the Government. The National Old Age Pension Scheme does not indicate guidelines regarding payment to be given either monthly, quarterly or annually. There is also much need for proper publicity of the programmes for effective implementation as well as proper information to the beneficiaries regarding availability and sanctioning of pension. The implementing department maintained that the reason for irregular payment was lack of sanction of funds by the Government.

CHAPTER-IV

PEOPLE'S PARTICIPATION IN WELFARE OF THE AGED: ROLE OF NON GOVERNMENTAL ORGANIZATIONS (NGOS)

Organization is as old as human society itself. With the modernization of the society, more and more organizations have come into being to meet the individual and societal needs. According to James D Mooney, "organization is the form of every human association for the attainment of a common purpose." According to David Sills, "voluntary organization is a group of persons organized on the basis of voluntary membership without state control, for the furtherance of some common interests of its members".

The presence of voluntary and Non Governmental Organizations ensure greater participation of the people in various activities. Generally, voluntary organizations and Non Governmental Organizations are treated as one but it must be mentioned that all Non Government Organizations are not necessarily voluntary. Non Governmental Organizations may also be Government sponsored whereas voluntary organizations are spontaneous in their origin. The voluntary/ Non Governmental Organizations pose a great deal of comfort to the society. This is due to their sense of dedication, flexibility, self reliance and the fact that they are nearer to the people. The State alone cannot provide adequate welfare services. The State and

voluntary organizations supplement each other to meet the requirements of social administration and for all round development of the nation.

The National Policy for Older Persons was passed in 1999 and the year 2000 was declared by the Government of India as the National Year of Older Persons. The Policy highlights the rising population of the elderly segment laying emphasis on their health, shelter and welfare. Further, it laid emphasis in the dominant role to be played by the Non Governmental Organizations (NGOs) in assisting the Government to bring about a society where the needs and priorities of the aged are taken into account. While the Government continues its efforts to introduce programmes for the welfare of the aged, it is the Non Governmental Organizations which have played a key role in bringing to the forefront the problems of the older people to the society at large and through its various services it has sown the seeds for a forum whereby the voice and the concerns of the elderly can be addressed.³⁴

Non Governmental Organizations (NGOs) in Mizoram

Though there are a large number of Non Governmental Organizations (NGOs) in Mizoram, most of them are not concerned with welfare of the aged. The biggest and the most influential of Non Governmental Organizations in Mizoram are Young Mizo Association (YMA), Mizoram Hmeichhe Insuihkhawm Pawl (Mizoram Women's Federation), Mizo Zirlai Pawl (Mizo Students Union) and Mizoram Upa Pawl (Senior Citizens Association). The strongest and the oldest among

³⁴Sawhney Maneeta, *Non Governmental Organizations commitment to the Elderly in India*, Institute of Economic Growth, New Delhi, p. 2

them is the Young Mizo Association. It has played a great role in many fields like preservation of culture, upliftment of society, education and others. It has, throughout the ages, laid emphasis on respect for elders. The Mizoram Women's Federation works mainly for the welfare and upliftment of women. These main Non Governmental Organizations often cooperate with each other to deal with vital matters affecting the Mizo society.

Mizoram Upa Pawl (Senior Citizens Association)

The premier organization working for the cause of the aged is the Mizoram Upa Pawl (Senior Citizens Association). The Mizoram Upa Pawl or Senior Citizens Association was established in the year 1957. At this time, it was called Zoram Upa Pawl. From the year 1992, it changed its name to Mizoram Upa Pawl. It is a non-partisan body. It is commonly known as MUP. It is a non-partisan voluntary organization and is registered under the Charitable Society Act XXI of 1860 SR/-7 of 1977. Any person above 50 years who is a true resident of Mizoram can be a member. The organization is affiliated to the Federation of Associations of Senior Citizens (FASC) of India. Its General Headquarters is at Aizawl. It has six (6) sub-headquarters. More than 5 units can form an area. The total number of areas is at present, 73. There are 560 units in the whole of Mizoram. In the General Headquarters Office, there is a staff consisting of the General Secretary, Office Superintendent, two (2) Lower Division Clerks (LDC), Computer Operator and two (2) Fourth (IV) Grade. There are 9 Office Bearers headed by the President.

In 2011, the total number of members stands at 50,750. Any person, male or female above 50 years of age who is a true resident of Mizoram can

be a member. Membership fee is Rs.5/- only. An annual fee of Rs.5/- is also given to the local Unit.

Apart from its Motto which is *“To be a blessing to many others”*, the aims and objectives of Mizoram Upa Pawl are:

- 1) To help the senior citizens to identify, assess and evaluate their problems and to look for solution so that they can continue to enjoy healthy and happy life.
- 2) To help, advice and assist public leaders.
- 3) To maintain, as far as practicable uphold Mizo customary laws, culture, traditional and practices from time immemorial and if necessary to help amend or improve those which, on careful examination are found no longer suited to the existing practices of the Mizo society.
- 4) To offer opinions and advice to the concerned authorities in matters concerning economic development of the State.
- 5) To be very watchful of the political, social and economical life of the Mizos and to help guide the people if found following wrongful and undesirable ways to better and more correct ways.
- 6) To offer advice whenever the association feels it necessary to the State Government for efficient management of any of its machineries.

- 7) To be ready, when the situation demands, to work together with other NGOs for a common good cause.

Role

The Mizoram Upa Pawl has started a Charitable Trust. It is governed by the Mizoram Upa Pawl Charity Fund Rules of 2003. It is commonly known as Mizoram Upa Pawl Charity Fund. Through this Fund, the organization carries out community development programmes. The members are very active in identifying their unit members, finding out the helpless and the needy and providing them with financial and physical help. They seek out the destitute and the helpless and give them financial assistance from their own contribution. From the Charity Fund, 303 persons have been identified and given financial help from the organization. At present, the total amount which has been sanctioned is Rs.37270/-. The amount to be given is not fixed and differs from person to person depending on their circumstances.

The members of Mizoram Upa Pawl often organize meetings in order to refresh themselves. In these meetings, they conduct recreational items such as solo, group singing, jokes, recitation, cultural items, chanting of old Mizo songs, games, dancing etc. Sometimes, lectures are also given on various subjects such as health education, sanitation, care of the aged and how to rear successful families.

Another activity of the Mizoram Upa Pawl is that they have instituted the Mizo Medal and awards are given by the organization to those who

possess extraordinary bravery or social work. Such awards and medals have been given to a good number of people.

On 23rd November 2007, Aizawl City Area leaders of Mizoram Upa Pawl met together to discuss the Scheme of Adopt a Gran Programme which is funded by HelpAge India (a National Voluntary Organization). Under this programme, HelpAge India has sanctioned Rs. 500/- each to 30 persons within Aizawl City. The beneficiaries are chosen by Mizoram Upa Pawl (MUP) Area leaders. Two or three persons are selected from each Area.

Monthly Magazine is also published by the organization. Interesting articles and information about the organization are provided in the magazines. They also have a General Assembly every year for two (2) days with different annual themes every year. The organization declared 2006 as the “year of anti- corruption”. Representatives of the organization often have special interactions with Ministers and high officials of the State giving them constructive advice on issues concerning public health.³⁵ Their theme for the year 2011 was “virtue and honesty”.

International Collaboration

One of the International collaborative activities of Mizoram Upa Pawl was with the World Health organization back in November 2005. The Programme was called Community Based Health Care for the Elderly in Mizoram. The main objectives of the programme include providing health

³⁵ Lianzela, Vanlalchhawna, (eds) (2007) *Aging in North East India: Magnitude of the Problems of Elderly Persons in Mizoram*, New Delhi: Akansha Publishing House, p. 53.

care for the identified diseases like hypertension, diabetes and special sensory impairments, providing simple physiotherapy and fitness exercises for affected persons, developing a medium for social interaction, and increasing health awareness among the elderly.

The Clinic was run at Mizoram Upa Pawl (Senior Citizens Association) General Headquarters. Due to the Central location and easy accessibility, a large number of elderly citizens were able to attend the free clinics. To cater to the Northern part of Aizawl, a clinic was also set up at Agapia Social Centre.

Mizoram Upa Pawl has taken great efforts to improve the welfare of the aged population in Mizoram. One of its most recognisable efforts is setting up of a Charity Fund with a target of Rs. 50 lakh. The fact that it has rendered help to 303 needy persons is worth mentioning. At the time of study, members of Mizoram Upa Pawl are currently undertaking a project to establish Elder Care Nursing Home in Zemabawk.

Though the Government has taken various steps for the benefit of the aged in Mizoram, most of their recommendations to the State Government has proved fruitless. The only response from the Government is in the form of occasional grants. Other recommendations made to the Government regarding setting up of a geriatric ward in Civil Hospital has also not been met. They have also urged the State Government to revise the State Policy for Older Persons but to no avail. They have also implored the Government to make equal payments to beneficiaries of National Old Age Pension and use the members of Mizoram Upa Pawl as the agency to deliver the pension to their doorstep. But this has also proved fruitless. It is worth a while to

mention that while the Government is quick to respond to address the needs of other Non Governmental Organizations, it seems to content itself to cater to the wishes of the studied group by merely giving them grants now and then. It is common knowledge that that members cannot go to extremities in pressurising the Government. A good question that arises is whether the Government is neglecting the voices of this group who continues to be good resources to the State Government itself.

The State Government has been implementing various schemes including Central government Schemes for the benefits of the elderly people. However, the schemes and projects of the Government are still far from satisfactory.³⁶ Older citizens all over the world including Mizoram are getting more and more attention as their number increases. There is ample evidence that older people have become more fit, and have more to offer than any other time in the past. Today, even in Mizoram, many well known politicians, businessmen and professionals continue to work contribute to society well beyond the usual age of retirement. As such, old age should be thought of as a bonus and as an opportunity for individual renaissance. Looking forward to the future with enthusiasm and seeing old age as a period for potential to grow, one could keep the vital spark that existed once within oneself alive.³⁷

The Mizoram Upa Pawl is the main organization working towards the welfare of the aged. Their contribution however is limited by the age factor. Their expectations from the Government at the time of study are:

³⁶ Lianzela, Vanlalchhawna, (eds) *op.cit.*, p. 54.

³⁷ *Ibid.*, p. 56.

1. Separate counters at public places particularly hospitals for senior citizens.
2. Time bound revision of pension.
3. Constitution of the State Council for Older Persons.
4. Mobile medical help.
5. Separate Geriatric Ward in hospitals.

CHAPTER-V

SUGGESTIONS AND CONCLUSION

According to 2001 Census, the percentage share of the aged population in Mizoram was 5.52 percent. It was 4.42 percent back in 1981. The total number of 60+ population in 2001 was 49,023. The number was 33185 in 1991 showing a decadal growth rate of 48 percent from 1991-2001. The sex ratio of the aged population in 2001 was 975 per 1000 males. The old age dependency ratio (number of 60+ per persons in the 15-59 age groups) has increased from 7.95 percent in 1981 to 9.33 percent in 2001. The dependency ratio is higher in the rural areas (10 percent) than in the urban areas (8 percent). The study area, i.e. Aizawl District, is 3,576 in square kilometres. According to the 2001 Census Report, the total population is 325676. Out of this, the number of the aged in Aizawl District was 18019.

The problems faced by the aged in Mizoram are multi dimensional and includes poverty, health, financial insecurity and so on. Their problems become more acute and require special attention when poverty is accompanied with other disabilities like gender and old age. According to the Statistical Handbook of Mizoram 2010, in Aizawl District, the total number of families living below the poverty line was 16,426 during the year 2009-2010. The number of households living below the poverty line was 14,669 during the year 2008-2009 showing an increase of 1757 BPL families. There is no specific data on households having 60+ group. Out of

2583 beneficiaries of Annapurna Scheme in the whole of Mizoram, 653 are from Aizawl District. The total number of beneficiaries of Indira Gandhi National Old Age Pension in Aizawl District was 5713 at the time of study.

One of the objectives of the study was to find out the programmes and schemes available for the aged and the problems in implementation. The main purpose of welfare programmes for the aged in Mizoram is to identify destitute persons who have no means of subsistence and to clothe them with economic security in terms of old age pension benefits and provide the homeless with the basic needs of life. In Mizoram, welfare programmes provided for the aged provided by the Government comes in the form of National Old Age Pension Scheme, Annapurna scheme as well as Old Age Home. The former two schemes benefit over 35 percent of the aged population in Aizawl District, old age pension (31 percent) and Annapurna scheme (3.6 percent) respectively. The old age home also provides food, clothing and shelter to four destitute at present. The total number of beneficiaries of Indira Gandhi National Old Age Pension at the time of study was 5713 according to official records. Out of this, 3085 beneficiaries are receiving Rs.250/- per month. The remaining 2628 beneficiaries are receiving Rs.200/- per month. The difference in amount is due to the fact that the former are getting an additional support from the State Government at the amount of Rs.50/- per beneficiary. The additional cannot be given to the latter group due to paucity of funds. The pension is also not paid every month and is usually given in arrears as soon as money is sanctioned by the Government.

Many factors are responsible for the increasing problems faced by the aged in Aizawl District. Their problems become greater when they are faced with abject poverty. The study revealed the problems faced by the aged and also whether the programme and facilities have benefitted them or not. In order to assess the problems faced by the aged, questionnaire was distributed to two hundred (200) beneficiaries of National Old Age Pension Scheme and two hundred and fifty (250) non beneficiaries. From the questionnaire, it was clear that the quality of life of the aged depends upon their health, age and status.

Ninety (90) percent of the non beneficiaries of old age pension interviewed lives in their own houses. 70 percent have spouses and all of them claim that they are being well taken care of by their families. 40 percent of this group holds that their main problems are related to health, while 60 percent have financial problems. Their main activities relate to NGO activities, watching television, reading newspapers, going to church and supervising grandchildren. 40 percent express loneliness while the remaining 60 percent do not feel lonely. Only 40 percent are aware of concessions given to senior citizens and avail of such. 60 percent knows about savings scheme for senior citizens and avail of such schemes. 80 percent claims that they are respected by the society in general. Since they are non beneficiaries of Old Age Pension, welfare schemes are not meaningful to their lives. There are no recreational centres in their localities and majority of them expressed the desire to have a geriatric ward in hospitals. When asked about what should be the priorities taken by the Government for their welfare, majority of them were in favour of health facilities and setting up of recreational centres.

Of the two hundred and fifty (250) beneficiaries of Old Age Pension who were interviewed, only 60 percent have spouses and 65 percent said that they were well taken care of by their families. 40 percent live in their own houses. 40 percent of this group claims that their main problems are related to finance while 20 percent claim that health is their main problem and the remaining 20 percent stated both health and finance as their main problems. The main activities of this group are reading newspapers, watching television, going to church and supervising children, 60 percent of this group feels lonely. 60 percent uses their pension for their own needs while the remaining spends the money on basic necessities. When asked if the amount is adequate to meet their basic needs, 70 percent said no while others said it is all right. However, all of them said they benefit from the old age pension. 60 percent holds that respect is given to them as an older person. They have no knowledge of concessions provided by banks et al. There are no recreational centres in their local areas and geriatric ward is also favoured by all of them. They also feel that the Government should take steps regarding health facilities and setting up of recreational centres.

A certain number of the aged in Mizoram do not present a vital problem to the society in general and to the welfare department in particular as they are economically independent and fully able to control their lives. Some of them are less economically independent but they are adequately taken care of by their children or other relatives.

It is the condition of the BPL group and the destitute which requires immediate attention of the Government and the society as a whole. Those who have no children and are being looked after by others feel neglected.

The aged especially those who have lost their their spouses feel very lonely and neglected. They suffer from illnesses of different kinds and do not have the finance to meet their health problems. They have no feeling of security in terms of basic needs like food, clothing and shelter. They live in rented houses. Though the National Old Age Pension is very much appreciated, it is very meagre and not enough to meet their basic needs not to mention different medications required to meet their health problems. In terms of the old age pension, the beneficiaries express the desire to receive their pension at their doorstep as it is very difficult for them to go to District Social Welfare Office to receive the pension.

Most of them feel that they are properly looked after by their families. But the BPL categories feel a sense of helplessness at the same time due to financial constraints and health problems. The lucky few maintained that they had received help from good citizens in cash and kind as well as from Mizoram Senior Citizens Association (MUP) in the form of financial assistance.

In traditional Mizo society, there was a tendency on the part of the aged to refuse to get medical attention. Most of them even refused to take even a small medication believing that God would help them. They refrained from seeking medical help. This was the case with our forefathers. Today, they usually go to OPD for health checkups but some of them expressed difficulty or restraint due to lack of separate counters for the aged. Some of them go to private clinics because of this. Majority of the groups express desire for a separate Geriatric Ward.

There is only one Old Age Home in Aizawl District. At the time of study, there were only four inmates at the home. The study revealed that the inmates of old age home belonged to different age groups and the circumstances which led them to the home were also different. Though there were four inmates at the time of conducting the study, one inmate was not in good physical and mental condition. Thus only three were interviewed. There are two rooms set aside for male inmates. Since all the inmates belonged to the male category at the time of visit, each room was being shared by two inmates. The main thing they liked about the home is that they have nowhere else to go and the home provides the basic necessities. However, they complained about the isolated location. Though there is a television, they are not keen on watching. The three of them also expressed loneliness and the lack of friendship between the inmates. They rate the food provided as average and look forward to special meals provided every Wednesday and Sunday. They stated that medicines are provided only when they are sick and expressed desire to be provided with vitamins in their old age.

Out of the three inmates, only one stated that he will remain in the home till he dies as everyone is given not only a proper burial but also a memorial is held in their names. They are allowed to go out with the permission of the warden, and they often go on morning walks to the connecting village. The only recreational facilities available to the inmates are television with cable connection, tape recorder, radio, carrom board, newspapers, books etc and expressed the desire for more entertainment. Though they are allowed to maintain kitchen garden the present inmates did not maintain any at the time of visit. The staffs in charge of the home were

also aware of the lack of friendship between the inmates. They hold that all the inmates stay out of each other's way and pointed out that their age differences could be the reason for this. The main complaint of the staff is the approach road to the old age home.

Impact on living conditions

The study revealed that basically, the schemes have resulted in improvements in the quality of life. All the beneficiaries of the old age pension hold that the pension has benefitted them in one way or the other. The pension makes them self dependent and gives them a certain amount of security. Though from a general point of view, the pension amount is very less, the plight of some people is such that they are very happy to receive whatever amount is given to them. Thus, all the beneficiaries are grateful for the payment as it gives them a sense of security though 70 percent holds that it is not even enough to meet their medical needs. The welfare programmes have benefitted the targeted groups to some extent. In other words, the impact of schemes on their living conditions is not significant though they are grateful. It was observed that the selection of beneficiaries is also fairly done due to NGO involvement in the process. The Inmates of Old Age Home are also grateful that they are getting the basic necessities at the Home. To the inmates, getting a proper burial with a memorial held in their names is also one of the attractions of the Home.

It was also observed that the main problems in implementing welfare schemes for the aged are paucity of funds and lack of strong directions from the Central Government. The concerned Department stated that the irregularity in payment of old age pension is due to delay in sanctioning of

funds. There is also no time schedule for filling up of application forms and they receive forms all year long. It was observed that more than eight thousand (8000) applications were pending at the time of study. The main reason for pending of application forms is due to non availability of funds. Payment of pension is also done through personal collection at District Social Welfare Office, which, according to official information, is the choice of District Social Welfare Office. Thus welfare schemes for the aged cannot be properly implemented due to delay in sanctioning of funds as well as non availability of funds to keep up with the increasing demands. The State Government's commitment to promoting the welfare of the aged is generally not up to expectation. Proper information about the schemes is also not given to the target groups. It is largely felt that the State Government can do better and strive towards greater goals for the aged in Mizoram.

Suggestions

In the introduction, a general background regarding International and National concerns towards the aged has been given. The United Nations have encouraged countries all over the world to take initiatives regarding the welfare of the aged. The United Nations Principles for Older Persons has been adopted since 1991. It also encouraged member states to frame their national policies concerning the aged. Accordingly, India has framed a National Policy for Older Persons in 1999. Twelve years later, i.e., 2011, the newly revised draft policy for older persons is ready for enactment by the Parliament of India. In the case of Mizoram, it was back in 2003 that the State Policy for Older Persons was passed. However, to this day, the State Council for Older Persons has not been constituted. The State Policy for

Older Persons is no doubt very important to give directions to the course of action for which the decision making body is responsible. There is an utmost need to put into practice the directions of the State Policy for Older Persons which was passed back in 2003. An even greater need is to review the draft policy itself. For revision of the policy, there is a great need to consider the suggestions of member/leaders of Mizoram Upa Pawl and the Caretaker of Old Age Home. This stems from the fact that they are directly in day to day contact with the group and are likely to know best the problems faced by them as well as the needs of this group.

In chapter two, the evolution of the notion of welfare of the aged has been described. People all over the world through the ages have always been governed by humanitarian principles. Indian culture also lays emphasis on honouring our parents. Even in Mizoram, the notion of aged welfare has evolved from the days when the institution of *Zawlbuk* dominated the lives of the Mizo community. The creation of the Department of Social Welfare from a small wing and its expansion to a separate Directorate of Social Welfare marked the beginning of welfare towards the aged from the Government side. The most significant step taken towards welfare of the aged was the passing of the State Policy for Older Persons. It is suggested that immediate attention be given to creation of the State Council for Older Persons for effective implementation of the State Policy for Older Persons.

In Chapter three, welfare schemes and facilities available to the aged in Mizoram have been presented. Welfare schemes for the aged in Mizoram come mainly in the form of National Old Age Pension Scheme and Annapurna Scheme. The pension is also not paid every month and is usually

given in arrears as soon as money is sanctioned by the Government. The National Old Age Pension Scheme does not indicate guidelines regarding payment to be given either monthly, quarterly or annually. At the time of the researcher's visit to District Social Welfare Office, there were a number of beneficiaries inquiring about payment of pension. The beneficiaries informed that the last payment was collected in March 2011. They have not received their pension for the current financial year. There is a need for the funding Ministry to address to this problem. There is also much need for proper publicity of the programmes for effective implementation as well as proper information to the beneficiaries regarding availability and sanctioning of pension. The implementing department maintained that the reason for irregular payment was lack of sanction of funds by the Government. Thus most beneficiaries waste their time and energy in collecting their pension from the District Social Welfare Office. A proper system of information to the beneficiaries either through television or Radio is suggested. Further, the scheme stipulates payment of the pension either through money order or via bank accounts but in Aizawl, in fact in the whole of Mizoram, the pension is collected by the beneficiaries at the District Social Welfare Office or CDPO as the case may be. This is time consuming as well as problematic for the targeted people as payment is not regular. Amount of pension given to the destitute is also very less though it very much appreciated by the beneficiaries. In the new draft Policy for Older Persons, there is a suggestion for raising the amount to Rs. 1000/- which would be very much welcomed by the beneficiaries.

Institutional facility in the form of old age home was also studied. The home is located in an isolated corner of Luangmual Complex.

The approach road is not even metalled and one would prefer to go by foot considering the road situation. It is suggested that more entertainment should be provided to the inmates of the only old age home in Aizawl District and urgent attention be given to the approach road. It is also suggested that medicines including vitamins should be distributed free of cost so that they do not have to spend what little they have on medicines.

In chapter four, the role of the Mizoram Upa Pawl (Senior Citizens Association of Mizoram) is outlined. They have made tremendous efforts to make the lives of the aged more comfortable. However, there are many hindrances faced by them due to their own age factor and non cooperation from the State Government. It is suggested that a welfare Fund for the aged should be set up. In other States of India, there is a scheme called Amrit varsha which is carried out by the voluntary organization called Helpage India. Through this scheme, monthly donations in the like of Pay Roll Savings are contributed by their State Officers and Corporate Offices towards welfare of the aged. It is suggested that the Government of Mizoram and Mizoram Upa Pawl (Senior Citizens Association) take similar initiative in this direction so that officers of Government of Mizoram can make compulsory contribution of a stipulated amount for the welfare of the aged in Mizoram.

In Mizoram, the family is still the most effective provider of old age support. This could be attributed to the fact that Mizoram is a close knit society and the people at large are not willing to put their parents in institutions. The fact that there is only one old age home in Aizawl District and the total number of inmates at the home is ample evidence that the

family continues to be the caregiver. Till today, in Churches of Mizoram, a prominent seating place is given to the elderly people. Not only that, in any public gathering (in times of joy and sorrow) elderly people are always given a place to sit. Besides, on special occasions like Christmas celebration or some eventful celebration, old people are often given special treatment by giving a special dish with special seating arrangement. Sometimes, they are given special presents just for being old.³⁸

The essence of a democracy is to provide special protection to the vulnerable sections of the society; protection that includes social and economic security. In India, experiences have shown that there is much difficulty in implementation of policies of Government. There is a vast difference between the direction of the State and achievements by its functionaries. The major problems faced by the aged in Mizoram are in the areas of finance, socio-economic and health. There is much that needs to be done for the welfare of the aged. The needs of the elderly are increasing and the Government and Non Governmental Organisations must cooperate to meet their unmet needs. There should also be more stringent directions in implementing schemes sponsored by the Central Government.

The World Health Organization argues that countries can afford to get old if governments, international organizations and civil society enact “active ageing” policies and programmes that enhance the health, participation and security of older persons. These policies should be based

³⁸ Lianzela, Vanlalchhawna, (eds) (2007) *Aging in North East India: Magnitude of the Problems of Elderly Persons in Mizoram*, New Delhi: Akansha Publishing House, p. 15.

on the rights, needs, preferences and capacities of older people. It defines “Active Ageing” as the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age.

APPENDIX- I**QUESTIONNAIRE FOR BENEFICIARIES AND NON BENEFICIARIES
OF NATIONAL OLD AGE PENSION SCHEME**

Q1. What is your age?

Age:

Q2. Are you married or single?

a) Yes

b) No

Q3. Do you have children?

a) Yes

b) No

Q4. Are they working/ are they employed?

a) Yes

b) No

Q5. Who looks after you?

a) son

b) daughter

c) others

Q6. Where do you live?

a) own house

b) son'shouse

c) rented house

Q7. What are the main problems faced by you?

a) Health

b) Economic

c) Family

d) Poverty

Q8. What are your main activities? Tick three

a) tv, newspapers, walks

b) household activities

c) grand parenting

d) Interacting with friends

e) Going to church

Q9. Do you avail of old age Pension?

a) Yes

b) No

Q10. If so, how much is the old age pension received by you?

a) 200

b) 250

Q11. How do you receive the pension?

a) Bank

b) money order

c) DSWO office

Q12. Do you have any other source of income?

a) Yes

b) No

Q13. How do you utilize the pension money?

a) Put in Bank

b) Gives to family members

c) spend it on food etc

Q14. Is the Pension amount adequate to meet your basic needs?

a) Yes

b) No

Q15. Has the Pension Scheme benefitted you?

a) Yes

b) No

Q16. Do you avail of facilities like tax rebate, pension plans, air, railway and road travel concessions?

a) Yes

b) No

Q17. If so, do you avail of these concessions?

a) Yes

b) No

Q18. Are you aware of facilities provided by banks for senior citizens?

a) Yes

b) No

Q19. Do you avail of the bank offers?

a) Yes

b) No

Q20. As an older person, do you think you get respect from the society or people in general?

a) Yes

b) No

Q21. Are you offered seats in buses or public places?

a) Yes

b) No

Q22. Are there any recreational/multi service centres in your locality?

a) Yes

b) No

Q23. Are welfare programmes /schemes and facilities meaningful to your life?

a) Yes

b) No

Q24. Do you benefit from the welfare programmes and schemes?

- a) Yes
- b) No

Q25. What do you think should be the priorities taken by the Government for the welfare of the aged?

- a) Health sector
- b) Employment generating schemes
- c) Recreational Centres
- d) others

APPENDIX-II**QUESTIONNAIRE FOR SOCIAL WELFARE OFFICERS**

Q1. What do you think are the main problems faced by the aged in Mizoram?

- a) Health problems
- b) Financial
- c) Familial
- d) Economic

Q2. Do you think the amount of old age pension is adequate to meet the basic needs of the aged?

- a) Yes
- b) No

Q3. What is the main reason for unequal payment of pension?

- a) Paucity of funds
- b) Lack of strong insistence from the Central Government
- c) Both

Q4. Is proper information to the the aged about Schemes available for them?

- a) Yes
- b) No

Q5. Is there a time schedule for disbursement of pension?

- a) Yes
- b) No

Q6 .What is the mode of payment of Old Age Pension?

- a) Money Order
- b) Bank
- c) Collection at DSWO

Q7. What is the reason for personal collection of payment of pension at DSWO?

- a) Choice of beneficiaries
- b) Choice of DSWO

Q8.What is the main reason of irregular payment of pension?

- a) non sanctioning of funds
- b) delay in sanctioning of funds
- c) others

Q9.Is there a time limit for filling up of application forms?

- a) Yes
- b) No

Q10. How many applications are pending?

Ans:

Q11. what is the reason for pending of application forms?

Ans:

Q12. How many years/ months in delay?

Ans:

Q13. Is there adequate staff for implementing schemes for the aged?

a) Yes

b) No

Q14. What are the main problems in implementation of welfare Schemes meant for the aged?

a) Paucity of funds

b) Lack of strict orders on the part of Government

c) increase in demand but lack of increase in funds.

Q15. Do you think the State Government is committed to promoting the welfare of its aged population?

a) Yes

b) No

c) could do better

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