



India's Ageing Dilemma: A Sociological Review of Emergent Crises

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Abstract

India has been considered a young nation for a long time; nevertheless, the country's population is changing, and by the year 2050, about twenty percent of its inhabitants will be over the age of sixty. In this sociological overview, the new challenges and difficulties that come with getting older in India are examined using a sociological lens. It achieves this by analysing the gaps in policy, the changes in culture, and the structural disparities that exist. It examines the existing welfare models, which are primarily residual and means-tested, and draws attention to the fact that it is difficult for elderly people to obtain health care, that their pensions are inadequate, and that they receive very little assistance from institutions that are designed to assist them in active ageing. Although older people make significant contributions to the economy and provide care for others, they continue to be marginalised due to factors such as ageism, digital exclusion, and the loss of family support systems. Individuals, particularly older women, are made much more susceptible to harm as a result of differences between males and women. The essay advocates for a shift in perspective, moving away from a deficit model and towards one that views older people as providers of social capital and dignity. It does so by utilising sociological theories and contemporary research that have been empirically conducted. In conclusion, it poses three significant issues that ought to serve as a guide for policymakers and scholars in India as they strive towards the goal of making the society that is ageing more equitable and cohesive across generations.

Keywords: Dilemma, Emergent Crises, India.





Introduction

Most of the talk about ageing around the world is about developed countries, but India is going through a big change in its population, known as the "youth bulge." Almost 20% of India's population, or about 320 million people, will be 60 or older by 2050. This number is bigger than the total number of old people on many continents. This change in demographics affects not only the makeup of the population, but also the core values and how Indian society works. The health and social integration of older people are now important tests of the country's social and developmental values.

From a sociological point of view, ageing is more than just changing numbers. It questions what we think we know about how productive the economy is, how strong the bonds between generations are, and where older people fit into modern life. How Indian society treats its older citizens' needs, rights, and opportunities will shape its future shape and values. This article looks at three questions in a critical way: What ideas are behind India's current welfare policies for the elderly? How much power do older people have as contributors, carers, and social participants, even though there are cultural and structural barriers? How well do today's policies work with the fast changes in technology, modern life, and family structures? By talking about these topics, the article links real-life demographics to important sociological problems.

Models of Policy and Welfare

India's welfare response to an ageing population is based on three main areas: healthcare, financial support, and, to a much lesser extent, employment and active participation (Ravi et al., 2025). The way these policies are set up and how they change over time show both the sociological ambivalence towards ageing (moving between residual familialism and new ideas about state responsibility) and the bigger problems between welfarism and rights-based entitlements.

About 29% of India's seniors get a pension, mostly through the Indira Gandhi National Old Age Pension Scheme (IGNOAPS) and other state-level programs. These pensions are means-tested, which means they are mostly for people who are below the poverty line. They give out low payments that are often not enough. The Annapurna Yojana (providing food grains to poor seniors), the Atal Pension Yojana (APY) (aimed at informal workers), and the National Pension Scheme (NPS) (contributory, mostly for formal-sector workers) are all examples of a fragmented,





selective approach. The fact that so many people have to go through means-testing and that the "non-poor" elderly are left out, especially those who live in cities and have lower-middle incomes, shows that the government only helps people as a last resort, which is what T.H. Marshall and other welfare theorists have said. The Maintenance and Welfare of Parents and Senior Citizens Act (MWPSA Act, 2007) is supposed to shift care responsibilities back to families. It does this by creating a formal mechanism, but in practice, it strengthens the family as the main source of support, which is a theme that has been important in Indian sociology for a long time (Parsons, 1942; Uberoi, 2006). Implementation is poor, and only a small number of elders use the law because of stigma and lack of knowledge.

In healthcare, the National Programme for Health Care of the Elderly (NPHCE) and insurance plans like PMJAY (Ayushman Bharat) try to meet the growing needs for geriatric and chronic care. But only about 25% of older people are covered, and there are only 270 geriatricians for a population of more than 140 million elderly people (Ravi et al. 2025). The increasing number of noncommunicable diseases and the high cost of palliative care make it even clearer that a health initiative that is too thinly spread, focused on cities, and weak in institutions is not enough. Sociologists like Sarah Lamb and Pierre Bourdieu would say that these problems are caused by a lack of resources and by deeper symbolic and structural marginalisation, where the health of older people is seen as a family or private burden instead of a public or collective good (Lamb, 2013; Bourdieu, 1986). There aren't many public programs that help older people stay economically or productively active. The new Senior Able Citizens Re-Employment in Dignity (SACRED) Portal is meant to help seniors find jobs, but it hasn't had much of an effect, especially on seniors who don't have access to technology or who don't speak English. The overwhelming focus on basic needs at the expense of work and active ageing shows a persistent deficit model (Havighurst, 1961), which sees old age as a time of passivity and dependence instead of a time of contribution and agency.

Six out of nine main programs are mostly about giving people material help. Policies mostly see older people as passive recipients, which activity theory and the "longevity dividend" debate both disagree with. The problems are built into the system: only half of those who are eligible know about major benefits, and programs like Rashtriya Vayoshri Yojana (RVY), which gives out assistive devices, are only used by less than 25% of the people who are sampled. Some of the





problems are hard enrolment, lack of digital literacy, and exclusionary criteria. Other problems are poor coordination between agencies and not enough money.

Many people think that cities are places of opportunity, but they are especially dangerous for older people who are not poor or middle-class. This is similar to what Bourdieu said about how social and economic capital affect access to welfare and power (Bourdieu, 1986). State-level plans are often politicised, and debates over pension reform (like switching from NPS to OPS) are more about winning elections than about real social issues. Marshall (1950) and later Esping-Andersen (1990) both stressed that the politics of welfare provision are not just about economic calculations, but also about different ideas of citizenship, worth, and justice between generations. So, India's old welfare system is still mostly paternalistic and residual. Policies focus on reducing poverty instead of protecting rights, dignity, or making later life more active and meaningful. The system's focus on minimal maintenance instead of overall health or social participation shows that policymakers aren't thinking outside the box when it comes to the realities and hopes of the ageing population.

Participation, Power, and Giving

People often think of older people as dependents or burdens, but sociological evidence shows that many elderly Indians are still very active in business, family, and social life long after the usual retirement age. More than 36% of people over 60 are still working, mostly in informal sectors that don't have formal protections for workers. This goes against the stereotype of the "inactive elder" and supports activity theory (Havighurst, 1961), which says that staying socially active is important for mental health and social integration in later life. Most of these workers are men, but a lot of older women do unpaid work, like cleaning, taking care of people, and farming, especially in rural and low-income areas.

In multigenerational households, older people both depend on and give important care. Grandparents are often the main carers for their grandchildren. This is becoming more important as more people move to cities and change the way families are set up (Béteille, 2002). But as extended family models fade away because of modernisation (Parsons, 1942), nuclearisation, and people moving to cities, many older people are becoming more socially isolated, vulnerable, and at risk of neglect or elder abuse.





Sociologists have said that ageism is kept alive by cultural stories and institutional structures that make it hard for older people to fully participate. Digital exclusion makes things even worse. More than half of Indian seniors don't know how to use technology or don't have access to it. This makes it hard for them to use e-governance, telehealth, and new "silver economies" that mostly serve wealthy urban elites. This gap in technology not only makes it harder for them to find work, but it also makes it harder for them to get important information and services, which makes them even more socially isolated.

Women are at "double jeopardy" (Beale, 1970) because they tend to live longer than men but have less access to pensions, personal savings, and social protections. Because of this mix of gender and age, they are more likely to be poor, alone, or abused as they get older (The New Indian Express, 2025). There are still structural inequalities, with only a small number of rich old people living in retirement homes and wellness centres. The vast majority of old people, on the other hand, rely on broken family care and weak social safety nets. Chronic illnesses, limited mobility, and bad infrastructure in rural areas make it hard for millions of older Indians to fully participate in society and the economy.

Some "active ageing" programs, senior citizen clubs, and local volunteer groups in India seem to help older people feel more in control, but these are small and not widely used in public policy or welfare strategies. There is still a strong need for society to see older adults as active social agents whose continued participation improves family, community, and economic life, rather than putting them in situations of dependency and decline.

Changing Values On Ageing in Society

Respect for older people has always been important in India, and this is something that classical texts and cultural stories often praise. But this respect is now at odds with the real lives of many older people, especially women. More than 70% of reported cases of elder abuse involve women. These women are more likely to be widowed, poor, and have trouble getting pensions and care (The New Indian Express, 2025). Indian scholars who write about Indian families, such as Louis Dumont and André Beteille, have said that in the past, elders were in charge of Indian families. However, these patterns have changed because of modern pressures. Recent studies have shown that social isolation is becoming more of a problem, especially for older people who live alone or





without adult children. This is especially true in cities where people move around a lot and families change a lot.

Family-based support is still seen as the main safety net (Parsons, 1942; Uberoi, 2006), but in modern India, it is not enough or fairly distributed. "Sandwich" generations, or people who care for both kids and older parents, are having a hard time because families are getting smaller, costs are going up, and gender roles are changing (Jain, 2025). Talcott Parsons' functionalist theory said that the family brought people together, but as sociologist Sarah Lamb (2013) and others have shown in India, these roles are in danger because of changes in population and modernisation.

People's age is affected by their socio-economic status, where they live (rural or urban), and the region they live in. For instance, Kerala has twice as many old people as Bihar, but its social safety nets and community infrastructure are stronger and more unique than those in Bihar. More than half of the elderly people in the lowest income group don't have enough money to live on, so they have to rely on private charity or informal work to make ends meet. Pierre Bourdieu's theory of social capital explains how resources, networks, and symbolic status affect the vulnerability and support of older people in India.

The problem gets worse because of things like digital inequality, economic marginalisation, and weak laws, especially those against elder abuse. Fewer than 20% of older people are good with technology, and the fact that there aren't enough regulated old age homes shows how bad the current infrastructure is (MOPSI, 2021). Women, people without children, and people from lower castes and communities are in an even worse situation. Anthony Giddens and Ulrich Beck say that modernisation is a double-edged sword: it gives some people more hope and chances, but it also makes others feel unsafe and lost. India's economy has changed quickly, making a "silver economy" for rich or urban-dwelling seniors (Jain, 2025), but most people haven't been able to keep up with the changes in policies and systems. Media, changing ideas about how to age well, and unresolved conflicts between family duties and traditions are all having a bigger effect on how people think.

Policy inaction and the stigma that still surrounds ageing could make material and social inequalities worse. They could also take attention away from the potential "longevity dividend" that a strong senior population offers (Ravi et al., 2025). In "The Coming of Age," Simone de Beauvoir wrote that how society treats older people shows how moral it is. India's ability to align





cultural values and policy frameworks with the realities of demographic change will determine whether it promotes dignity, inclusion, and agency or makes dependency and exclusion worse.

Conclusions

As a result of its rapidly ageing population, India will be confronted with a tremendous social and policy issue in the decades to come. The present welfare policies, which primarily focus limited financial help and a residual approach to state responsibility, are now being shown to have limitations as a result of the nation's demographic change, which was previously dominated by its young bulge. Traditional care provided by families, which was previously the dominant means of providing assistance to elderly people, is currently facing substantial strain as a result of urbanisation, migration, and the evolution of social standards.

There are programs that are designed to provide financial assistance, healthcare, and community participation to the elderly; but, these programs do not effectively address the different and complicated realities that older people face across a variety of geographical locations, socioeconomic groups, and genders. One common misconception about elderly people is that they are passive recipients of assistance rather than active contributors to their families, communities, and society as a whole. This deficit model fails to take into account the significant agency, resilience, and social capital that older people regularly exhibit, as well as the problems that arise from structural inequities and the changing dynamics of families.

The government of India has to revise its policies in order to recognise senior citizens as constitutionally protected individuals who are entitled to dignity, inclusion, and the ability to participate. It is of the utmost importance to make the most of the potential benefits that will come with an ageing population, which is commonly referred to as the "longevity dividend." It will be essential to have a strategy that is all-encompassing and inclusive, inviting participation from families, civic society, and the business sector. Furthermore, in order to combat ageism and redefine cultural notions of ageing in a setting that is becoming increasingly modernised, society attitudes need to undergo a transformation.

It is not only the well-being of millions of elderly people that will be affected by the decisions that are made today about investments in elder care, legal safeguards, social infrastructure, and empowerment; these decisions will also have an effect on the ethical foundation and growth path





of Indian society. The capacity of India to embrace this demographic reality with foresight, empathy, and innovation is the determining factor in whether or not the country will be able to develop an inclusive society that is distinguished by longevity, security, respect, and meaningful involvement.

There are three important questions that have emerged as key domains for the upcoming research and policy formulation opportunities: What are some of the ways that India might rethink its welfare and healthcare systems to ensure that all old people not only survive but also thrive with dignity and participate fully in society? Which unique frameworks of familial, communal, and technological support are the most helpful in bridging the differences that exist among older adults across a wide range of genders, income levels, and geographical regions? What are the most effective techniques for opposing ageism and encouraging inclusivity and solidarity among generations, regardless of whether they are legal, institutional, or civic in nature?

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