
ELDERLY CARE AND SOCIAL SECURITY POLICIES IN INDIA: A SOCIO-LEGAL STUDY

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ABSTRACT

India is undergoing a profound demographic transition, with the elderly population growing at an estimated decadal rate of 41%—one of the fastest globally. By 2050, older adults are expected to constitute over 20% of the total population, and by 2046, they will likely surpass the number of children aged 0-15 years. This demographic shift unfolds against a backdrop of rapid social transformation: the disintegration of traditional joint family systems, rising urbanization, increased labor migration, and changing gender dynamics. This article undertakes a socio-legal examination of India's elderly care and social security framework, focusing on two pillars: the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 (MWPSCA), and the National Social Assistance Programme (NSAP). Drawing on legislative analysis, judicial interpretations, and empirical data, the study identifies critical implementation gaps—including inadequate maintenance caps, irregular functioning of tribunals, exclusionary coverage, and gendered vulnerabilities. It argues that while India has established a normative legal framework, the translation of rights into lived realities remains incomplete. The article concludes with policy recommendations for bridging the gap between law and practice, including pension reforms, strengthening of geriatric healthcare infrastructure, and reimagining elder care as a shared state-family responsibility.

Keywords: Elderly care, social security, Maintenance and Welfare of Parents and Senior Citizens Act 2007, National Social Assistance Programme, socio-legal studies.

1. Introduction

The care of older persons occupies a distinctive position in India's socio-cultural and legal framework. Traditionally, Indian society has been characterized by a strong emphasis on family-based care, particularly through the joint family system. This system functioned as an informal yet robust mechanism of social security, where elderly members were supported through intergenerational co-residence, emotional bonding, and moral obligations rooted in cultural values such as *seva* (service) and respect for elders (Lamb, 2012). However, rapid processes of industrialization, urbanization, migration, and modernization have significantly altered these traditional arrangements, weakened familial support systems and increasing the vulnerability of older persons (Rajan & Kumar, 2003).

India is currently undergoing a demographic transition marked by a steady rise in its ageing population. According to the Ministry of Statistics and Programme Implementation, the report *Elderly in India 2021* highlights that the elderly population (aged 60 years and above) increased by over 34 million between 2011 and 2021. This demographic shift is accompanied by rising old-age dependency ratios, increasing life expectancy, and a higher prevalence of chronic illnesses, thereby intensifying the demand for healthcare, financial security, and social protection systems (MoSPI, 2021). The old-age dependency ratio has risen significantly from 10.9% in 1961 to 15.7% in 2021, reflecting the growing burden on the working-age population. More importantly, nearly 70% of elderly individuals in India depend on others for their daily needs, with elderly women facing disproportionate vulnerabilities due to longer life expectancy, widowhood, and limited access to financial resources (MoSPI, 2021). These figures underscore that ageing is not merely a demographic phenomenon but a pressing socio-economic issue that necessitates systematic state intervention and policy attention.

From a constitutional perspective, the Constitution of India provides a normative foundation for elderly welfare. Article 41, under the Directive Principles of State Policy, obligates the State to ensure public assistance in cases of old age, sickness, and disablement. Although these provisions are non-justiciable, they serve as guiding principles for the formulation of welfare policies and legislative measures aimed at protecting vulnerable populations (Sharma, 2019).

Despite this constitutional mandate, elderly care in India remained largely within the domain of family responsibility and charitable interventions for a long time. A significant legal transformation occurred with the enactment of the Maintenance and Welfare of Parents and

Senior Citizens Act, 2007, which institutionalized the right to maintenance and welfare for senior citizens. This legislation marked a paradigm shift by converting moral obligations of children and relatives into legally enforceable duties. It provides for the establishment of Maintenance Tribunals, enabling elderly individuals to claim financial support and protection against neglect and abuse (Government of India, 2007; Srivastava, 2020). Parallel to this legal framework, the National Social Assistance Programme (NSAP), introduced in 1995, represents a key policy initiative aimed at providing financial assistance to economically vulnerable elderly persons. Schemes such as the Indira Gandhi National Old Age Pension Scheme (IGNOAPS) offer basic income support to those below the poverty line. However, scholars have pointed out that the adequacy and accessibility of these benefits remain limited, particularly in rural areas and among marginalized communities (Dutta, 2021).

A socio-legal perspective is crucial to understanding elderly care in India because it bridges the gap between law in books and law in action. While legislative and policy frameworks appear comprehensive, their implementation is often hindered by factors such as lack of awareness, administrative inefficiencies, socio-cultural stigma, and economic inequalities (Menski, 2006). Furthermore, issues such as elder abuse, neglect, and social isolation highlight the limitations of both legal and familial support systems.

In this context, the present study undertakes a detailed socio-legal analysis of elderly care and social security policies in India. It focuses particularly on the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 and the National Social Assistance Programme. The study seeks to address the following research questions:

1. What legal rights and protections are available to elderly persons in India?
2. How effectively are these legal and policy frameworks implemented in practice?
3. What socio-economic and administrative barriers hinder the realization of these rights?

The study adopts a mixed methodological approach combining doctrinal and empirical analysis. It draws upon legislative texts, judicial pronouncements, government reports, and existing scholarly literature to critically evaluate the effectiveness of current frameworks. By situating legal provisions within their broader social context, the study aims to contribute to ongoing debates on ageing, welfare, and rights-based approaches to elderly care in India.

2. The Demographic and Social Context of Aging in India

2.1 Demographic Transition

India has long been described as a “young nation” due to its large working-age population; however, this characterization increasingly conceals a significant and accelerating demographic shift toward population ageing. According to the United Nations Population Fund (UNFPA) *India Ageing Report 2023*, the proportion of individuals aged 60 years and above is projected to rise sharply, more than doubling from around 10% in 2021 to nearly 20% by 2050 (UNFPA, 2023). This demographic transition signifies a structural transformation in the age composition of the population, with far-reaching implications for economic growth, healthcare systems, and social security frameworks. A particularly critical milestone is expected around 2046, when the population of older persons will surpass that of children aged 0–15 years (UNFPA, 2023). This inversion of the age pyramid marks a shift from a youth-dominated demographic structure to an ageing society, thereby increasing the old-age dependency burden and placing additional pressure on the working-age population.

Several interrelated demographic processes are driving this transition. First, there has been a substantial increase in life expectancy, which has risen from approximately 37 years at the time of India’s independence to over 70 years in recent decades (Registrar General of India, 2020). Improvements in healthcare infrastructure, vaccination programs, sanitation, and nutrition have significantly reduced mortality rates, enabling more individuals to live into old age.

Second, fertility rates in India have declined markedly over the past few decades. The Total Fertility Rate (TFR) has fallen to around or below the replacement level of 2.1 in many states, reflecting changing socio-economic conditions, increased access to education (especially for women), urbanization, and the adoption of family planning measures (International Institute for Population Sciences [IIPS], 2021). This decline reduces the proportion of younger individuals in the population, thereby accelerating the relative growth of the elderly population.

Third, the ageing of the large cohort born during the post-independence population boom has contributed significantly to the current demographic structure. As this cohort moves into older age groups, the absolute number of elderly persons increases substantially, intensifying the demand for age-related services such as healthcare, pensions, and social support (Bloom et al., 2015).

Importantly, population ageing in India is not uniform across regions. There are significant interstate variations reflecting differences in socio-economic development, healthcare access, and demographic patterns. States such as Kerala and Tamil Nadu have already reached advanced stages of demographic transition, with higher proportions of elderly populations comparable to developed countries (Giridhar et al., 2014). These states exhibit lower fertility rates, higher life expectancy, and better health indicators. In contrast, states like Uttar Pradesh and Bihar continue to have relatively younger populations due to higher fertility rates and slower demographic transition (IIPS, 2021). This regional disparity creates uneven policy challenges. While ageing states must focus on geriatric care, pension systems, and elderly welfare services, younger states need to prepare for future ageing while simultaneously addressing issues related to education, employment, and population growth. Thus, India faces a dual demographic challenge—managing current ageing in some regions while preparing for future ageing in others.

Furthermore, the demographic transition is closely linked with changing social structures. Traditional family-based support systems are weakening due to migration, urbanization, and the shift from joint to nuclear families. This has significant implications for elderly care, as institutional and state-based support systems have not yet fully compensated for the decline in familial care (Rajan & Kumar, 2003).

2.2 Social Challenges

The process of population ageing in India is accompanied by a range of complex social challenges that significantly affect the well-being, dignity, and quality of life of older persons. A policy directive published in the *Journal of the Indian Academy of Geriatrics* highlights that these challenges are multidimensional, encompassing familial, economic, health-related, psychological, and gender-based issues (Chatterjee & Patel, 2020). These factors are deeply interconnected and often reinforce each other, creating compounded vulnerabilities for the elderly population.

2.2.1 Family Disintegration and Social Isolation

One of the most significant transformations affecting elderly care in India is the gradual disintegration of the traditional joint family system. Processes such as urbanization, industrialization, and migration for employment have contributed to the rise of nuclear

families, thereby weakening intergenerational co-residence and support systems (Rajan & Kumar, 2003). Elderly individuals are increasingly left behind in rural areas when younger family members migrate to urban centers, or they may reside in urban households where emotional bonds are weakened due to changing lifestyles and time constraints. This often results in social isolation, loneliness, and a decline in emotional well-being. Elderly widows are particularly vulnerable, as widowhood often leads to social exclusion and reduced familial support (Lamb, 2012).

2.2.2 Economic Dependency and Financial Insecurity

Economic dependency remains a major concern for older persons in India. A significant proportion of the elderly population lacks access to formal pension systems, particularly those who have worked in the informal sector, which accounts for nearly 90% of India's workforce (International Labour Organization [ILO], 2018). As a result, most elderly individuals depend on their children or relatives for financial support, which can lead to insecurity, loss of autonomy, and, in some cases, neglect or exploitation. Gender disparities further exacerbate this issue. Women, due to their traditional roles in unpaid domestic and caregiving work, often lack independent income sources and pension entitlements, making them more economically vulnerable in old age (Duflo, 2012).

2.2.3 Health Issues and Limited Access to Care

Ageing is closely associated with an increased prevalence of chronic and non-communicable diseases such as hypertension, diabetes, arthritis, cardiovascular conditions, and dementia. According to the World Health Organization, older populations are more susceptible to multiple morbidities, requiring continuous and specialized healthcare services (WHO, 2021). However, access to healthcare remains uneven in India, particularly in rural areas where medical infrastructure is limited. Public healthcare systems are often overburdened, while private healthcare services are expensive and inaccessible to economically weaker sections. Moreover, institutional care services such as geriatric facilities, nursing homes, and professional home-based care remain underdeveloped. Consequently, caregiving responsibilities fall on family members, who may lack the necessary training, resources, or time to provide adequate care (Rajan et al., 2019).

2.2.4 Mental Health Concerns

Mental health is an often-overlooked dimension of elderly well-being. Studies suggest that nearly one in four elderly individuals in India suffers from some form of mental health issue, including depression, anxiety, and cognitive disorders such as dementia (Patel & Prince, 2001). Social isolation, bereavement, declining physical health, and economic insecurity are key contributing factors. Despite the prevalence of these issues, mental health among the elderly remains stigmatized and underreported. Limited awareness, lack of geriatric mental health services, and cultural perceptions that normalize psychological distress in old age contribute to poor diagnosis and treatment outcomes (WHO, 2017).

2.2.5 Elder Abuse and Neglect

Elder abuse is a growing yet largely hidden problem in India. It includes physical, emotional, psychological, and financial abuse, as well as neglect. Reports by HelpAge India indicate that a significant proportion of elderly individuals experience some form of abuse, often at the hands of family members (HelpAge India, 2022). However, such cases remain severely underreported due to factors such as fear of retaliation, emotional attachment to abusers, lack of legal awareness, and the private nature of family spaces. Social stigma and the normalization of neglect further discourage elderly individuals from seeking help. This highlights the gap between legal protections and their actual utilization.

2.2.6 Gender Inequalities and the Feminization of Ageing

Gender disparities play a critical role in shaping the experiences of ageing in India. The phenomenon of the “feminization of ageing” refers to the increasing proportion of women in the elderly population, primarily due to their higher life expectancy (UNFPA, 2023).

However, elderly women often face cumulative disadvantages throughout their life course, including lower literacy rates, limited workforce participation, wage disparities, and restricted access to property and inheritance rights. Widowhood further exacerbates their vulnerability, as widows may face social exclusion, economic deprivation, and cultural restrictions (Chen & Dreze, 1995). Additionally, patriarchal norms often discourage women from asserting their rights, leading to reduced access to legal remedies and welfare schemes. As a result, elderly women represent one of the most marginalized groups within the ageing population.

3. The Constitutional and Legislative Framework

3.1 Constitutional Foundations

The constitutional framework of India provides an important normative basis for the protection and welfare of elderly persons, even though it does not explicitly enumerate elderly rights as fundamental rights. The Constitution of India incorporates several provisions that indirectly address the needs of vulnerable populations, including senior citizens, primarily through the Directive Principles of State Policy (DPSPs).

Article 41 of the Constitution is particularly significant in this regard. It states that “*the State shall, within the limits of its economic capacity and development, make effective provision for securing the right to work, to education, and to public assistance in cases of unemployment, old age, sickness, and disablement, and in other cases of undeserved want*” (Government of India, 1950). This provision establishes a moral and constitutional obligation upon the State to ensure social security and welfare for the elderly. Although DPSPs are non-justiciable—meaning they cannot be directly enforced by courts—they serve as guiding principles for governance and policy formulation (Sharma, 2019).

The significance of Directive Principles has been emphasized in several judicial pronouncements, where courts have interpreted them as essential to achieving social and economic justice. In cases such as *Minerva Mills Ltd. v. Union of India* (1980), the Supreme Court of India highlighted the importance of maintaining a balance between Fundamental Rights and Directive Principles, asserting that both are integral to the Constitution’s vision of a welfare state. This interpretative approach has enabled courts to indirectly strengthen socio-economic rights, including those relevant to elderly welfare. In addition to Article 41, other constitutional provisions also contribute to the protection of elderly persons. Article 38 directs the State to promote the welfare of the people by securing a social order based on justice—social, economic, and political. Article 39(e) calls for the protection of the health and strength of citizens, while Article 46 emphasizes the protection of weaker sections of society. Collectively, these provisions create a constitutional ethos that supports the development of social security measures for vulnerable groups, including the elderly (Jain, 2018).

Despite this strong normative framework, elderly care in India historically remained within the domain of family responsibility and community support. The absence of enforceable legal

rights meant that elderly individuals often depended on informal systems of care, which were increasingly strained due to socio-economic transformations such as urbanization, migration, and the breakdown of joint family structures (Rajan & Kumar, 2003). The growing demographic pressure of an ageing population, combined with the weakening of traditional support systems, necessitated formal legislative intervention. This led to the enactment of the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 (MWPSA), which marked a significant shift in India's approach to elderly care. The Act transformed the moral duty of children and relatives to care for their elderly parents into a legally enforceable obligation. It provides mechanisms for maintenance claims, establishes tribunals for speedy redressal, and includes provisions for the protection of life and property of senior citizens (Government of India, 2007; Srivastava, 2020).

The transition from a welfare-oriented, non-enforceable constitutional directive to a rights-based statutory framework reflects the evolving understanding of ageing as a matter of public concern rather than a purely private or familial issue. However, scholars argue that while the constitutional vision is progressive, its realization depends heavily on effective implementation, administrative capacity, and public awareness (Menski, 2006).

3.2 The Maintenance and Welfare of Parents and Senior Citizens Act, 2007

The Maintenance and Welfare of Parents and Senior Citizens Act, 2007 (MWPSA) represents a significant shift in India's approach to elderly care, transforming traditional moral obligations into enforceable legal rights and establishing a statutory framework for maintenance, welfare, and protection of senior citizens (Srivastava, 2020). Under Section 2, the Act defines a senior citizen as any Indian aged 60 years or above and expands responsibility by including children such as sons, daughters, grandsons, and granddaughters, while also introducing the concept of "relative" for childless elderly persons, thereby ensuring accountability among potential heirs (Government of India, 2007; Jain, 2018). Section 4 forms the core of the Act by imposing a legal obligation on children and relatives to maintain elderly individuals so that they may lead a dignified and "normal life," a principle reinforced by judicial interpretation in *Vijay Manohar Arbat v. Kashirao Rajaram Sawai* (1987). To facilitate speedy justice, Section 7 provides for Maintenance Tribunals with powers akin to civil courts and simplified procedures, allowing even NGOs to file applications on behalf of the elderly (Srivastava, 2020). Section 9 authorizes tribunals to grant monthly maintenance, though the statutory cap of ₹10,000 has been widely

criticized as inadequate given rising living and healthcare costs (Dutta, 2021). Section 23 offers protection against property-related exploitation by declaring transfers void if maintenance obligations are not fulfilled, thereby safeguarding elderly individuals from coercion and neglect (Jain, 2018). Section 24 further criminalizes abandonment, recognizing it as a serious social issue, though enforcement is limited due to stigma and underreporting (HelpAge India, 2022). Additionally, Section 19 encourages the establishment of old-age homes, although its discretionary language has led to uneven implementation across states, while Section 20 mandates healthcare support such as reserved hospital facilities and geriatric services, aligning with global standards advocated by the World Health Organization, though practical challenges persist due to infrastructural and resource constraints (Rajan et al., 2019; WHO, 2021).

3.3 The National Social Assistance Programme (NSAP)

The National Social Assistance Programme (NSAP), introduced in 1995, represents the State's direct intervention in providing social security to economically vulnerable elderly persons, complementing the family-based obligations established under the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 (Government of India, 1995). Rooted in Article 41 of the Constitution of India, NSAP aims to reduce destitution through non-contributory pensions, with its flagship component, the Indira Gandhi National Old Age Pension Scheme (IGNOAPS), providing ₹200 per month to individuals aged 60–79 and ₹500 to those aged 80 and above, supplemented variably by state governments, resulting in average pensions of around ₹1,000–₹1,100 per month (Government of India, 2023; Dutta, 2021; Rajan et al., 2019). As of 2025, the programme covers approximately 3.09 crore beneficiaries, including over 2 crore elderly persons, with a budget allocation of ₹9,652 crore, reflecting its scale as one of the world's largest social pension schemes (Ministry of Rural Development, 2025; Government of India, 2025). Administrative reforms such as Aadhaar-based authentication and Direct Benefit Transfer (DBT) have enhanced transparency and efficiency, with about 94% of payments digitized, while innovations like the Digital Life Certification system have simplified verification processes for pensioners. However, despite these advancements, NSAP faces persistent challenges, including inadequate pension amounts that fail to meet basic subsistence needs, exclusion errors arising from BPL targeting, regional disparities due to uneven state contributions, and accessibility barriers linked to digital illiteracy and limited banking infrastructure, as highlighted by the World Bank (2022), thereby raising concerns about its effectiveness in ensuring economic security and dignity for India's ageing population.

4. Judicial Interpretation and Evolution

The judiciary in India, led by the Supreme Court of India and various High Courts, has played a transformative role in interpreting and expanding the scope of the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 (MWPSCA), ensuring that its provisions effectively safeguard the dignity and rights of senior citizens through a liberal and purposive approach. In *Ashwani Kumar v. Union of India* (2019), the Supreme Court addressed systemic gaps by directing governments to improve implementation, collect data on elderly care infrastructure, and enhance awareness, thereby framing elderly welfare as a matter of public policy rather than merely private obligation. The Court further strengthened property protections in *S. Vanitha v. The Deputy Commissioner* (2021) by holding that property transfers conditional upon maintenance become void if obligations are unmet, thus preventing exploitation of vulnerable seniors. High Courts have also broadened the meaning of “maintenance,” as seen in *Joy v. Tribunal for Maintenance* (2020), where it was interpreted to include not only financial support but also basic necessities and dignified living in line with Article 21 of the Constitution of India. In *Pawan Reley v. Union of India* (2022), the Delhi High Court upheld the right to legal representation before tribunals, enhancing access to justice, while in *Anil Kumar Dhiman v. State of Haryana* (2019), the Punjab and Haryana High Court affirmed the right of elderly parents to evict abusive children from self-acquired property, recognizing the emotional and psychological dimensions of elder abuse. Further reinforcing a rights-based perspective, *Shuchi Goel v. Shashi Goel* (2023) emphasized that senior citizens are entitled to live with dignity, encompassing emotional well-being and secure living conditions. Collectively, these judicial developments reflect key trends such as the expansion of welfare interpretation, strengthening of property rights, recognition of dignity and quality of life, and increased emphasis on both state responsibility and procedural fairness, thereby bridging the gap between legislative intent and ground-level realities.

5. Critical Analysis: Implementation Gaps and Challenges

Despite the progressive intent of the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 (MWPSCA) and the National Social Assistance Programme (NSAP), substantial gaps persist between legal provisions and their effective implementation due to structural, administrative, financial, and socio-cultural constraints. A major concern is the ₹10,000 cap on maintenance under Section 9(2), which is widely considered inadequate given rising living and

healthcare costs and fails to account for diverse socio-economic realities, with courts often awarding higher amounts in practice (Dutta, 2021; Srivastava, 2020). Additionally, the irregular functioning of Maintenance Tribunals—marked by delays, lack of infrastructure, and insufficient awareness—undermines access to justice, while the failure to appoint Conciliation Officers limits the possibility of amicable, family-centered dispute resolution (Rajan et al., 2019; HelpAge India, 2022). On the social security front, NSAP suffers from exclusionary BPL targeting and inadequate pension amounts, leaving many vulnerable elderly individuals without sufficient financial support despite covering millions (Ministry of Rural Development, 2025). The Act also reflects a disconnect between law and social realities by excluding daughters-in-law and sons-in-law from its definition of “children,” despite their central caregiving roles in many households (Jain, 2018). Procedural barriers, such as the restriction on legal representation under Section 17, further complicate access to justice, although courts have attempted to address this inconsistency. Moreover, weak enforcement of provisions related to old-age homes, due to discretionary language and lack of resources, limits institutional care options, while the absence of gender-sensitive provisions fails to address the heightened vulnerabilities of elderly women, particularly widows facing economic and social marginalization (Chen & Dreze, 1995; United Nations Population Fund, 2023). Finally, the existing framework reflects a narrow conception of geriatric care, focusing primarily on financial and medical needs while neglecting emotional, psychological, and social dimensions of ageing, as highlighted by the World Health Organization (2021), thereby underscoring the need for a more holistic and integrated approach to elderly welfare in India.

6. Socio-Legal Analysis: The Limits of Legal Enforcement

The evolving legal framework for elderly care in India, including measures such as the Telangana Employees Accountability and Monitoring of Parental Support Bill, 2026, reflects a growing attempt to strengthen enforcement of filial responsibility through economic sanctions; however, it simultaneously exposes the inherent limits of legal coercion in regulating family-based care (Government of Telangana, 2026). While statutes like the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 (MWPSCA) formalize obligations of children and relatives, caregiving extends beyond financial support to include emotional, physical, and psychological dimensions that cannot be effectively mandated by law, as legal systems can compel monetary transfers but cannot ensure affection, companionship, or quality care (Menski, 2006). Rapid socio-economic transformations—such as urbanization, migration,

and the rise of nuclear and dual-income households—have weakened traditional caregiving structures, increasing the opportunity cost of care and limiting the feasibility of enforcing proximity-based support (Rajan & Kumar, 2003; Duflo, 2012). Consequently, a gap persists between “law in books” and “law in action,” driven by factors such as lack of awareness, social stigma, administrative inefficiencies, and cultural norms that discourage legal action against family members (HelpAge India, 2022). Moreover, existing frameworks emphasize financial maintenance while neglecting the broader “care deficit,” including daily assistance, emotional well-being, mental health, and social inclusion, which are essential components of healthy ageing as emphasized by the World Health Organization (2021). These limitations underscore the need for a multi-sectoral approach that integrates legal enforcement with community-based services, home-based healthcare, strengthened social security systems, institutional care options, and supportive workplace policies, as also advocated by the International Labour Organization (2018). Ultimately, while legal mechanisms are necessary to ensure accountability, a balanced and holistic framework combining law, policy, and social support is essential to address the complex realities of ageing and to ensure dignity, security, and well-being for elderly persons in India.

7. Conclusion

India stands at a critical demographic juncture, where the steady rise in its ageing population is transforming the social, economic, and legal landscape. According to the United Nations Population Fund, older persons are projected to constitute nearly one-fifth of India’s population by 2050, and by 2046 they are expected to outnumber children aged 0–15 years (UNFPA, 2023). This demographic shift necessitates urgent and sustained policy attention, as it fundamentally alters dependency structures, healthcare demands, and social support systems.

This study has examined the two principal pillars of India’s elderly care framework: the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 (MWPSCA) and the National Social Assistance Programme (NSAP). Together, these frameworks represent an attempt to balance familial responsibility with state intervention. The MWPSCA establishes a legal obligation on children and relatives to provide maintenance and welfare, while NSAP offers direct financial support to economically vulnerable elderly individuals. At a normative level, the legal framework is progressive and aligns with the constitutional vision articulated in Article 41 of the Constitution of India, which emphasizes public assistance in cases of old

age, sickness, and disablement. The MWPSCA recognizes the right of senior citizens to maintenance, provides for the establishment of Maintenance Tribunals, safeguards property rights under Section 23, and criminalizes abandonment under Section 24 (Government of India, 2007).

The judiciary, particularly the Supreme Court of India, has played a pivotal role in strengthening the implementation of the Act. In *Ashwani Kumar v. Union of India* (2019), the Court emphasized the need for effective enforcement, improved geriatric care infrastructure, and greater awareness of elderly rights. Such judicial interventions have contributed to a rights-based interpretation of elderly welfare, emphasizing dignity and quality of life.

Similarly, NSAP has emerged as a crucial instrument of social security, covering over 3 crore beneficiaries, including more than 2 crore elderly persons under IGNOAPS (Ministry of Rural Development, 2025). The adoption of digitization measures such as Aadhaar-based authentication and Direct Benefit Transfer (DBT) has improved transparency, reduced leakages, and enhanced efficiency in benefit delivery (World Bank, 2022).

However, despite these advancements, the gap between legal provisions and ground realities remains significant. Several structural and administrative challenges continue to hinder effective implementation. The statutory cap of ₹10,000 under the MWPSCA is inadequate in the face of rising living and healthcare costs (Dutta, 2021). Maintenance Tribunals often suffer from irregular functioning, lack of infrastructure, and limited accessibility, particularly in rural areas (Rajan et al., 2019). Furthermore, key institutional mechanisms such as Conciliation Officers remain largely unimplemented, undermining the Act's emphasis on amicable dispute resolution. The discretionary nature of provisions relating to old-age homes has resulted in inadequate institutional care facilities, while existing homes are frequently underfunded and poorly regulated. On the social security front, NSAP continues to face challenges of exclusion and inadequacy. The BPL-targeting mechanism excludes many vulnerable elderly individuals, and the pension amount—averaging around ₹1,000–₹1,100 per month—remains insufficient to ensure a dignified standard of living (Dutta, 2021).

A critical limitation of the current framework lies in its narrow conception of elderly care. As noted by the World Health Organization, healthy ageing requires a holistic approach encompassing physical health, mental well-being, social participation, and economic security (WHO, 2021). The MWPSCA, however, primarily focuses on financial maintenance and

medical care, neglecting essential aspects such as emotional support, personal care, and social inclusion. Gender disparities further complicate the landscape of elderly care. The “feminization of ageing,” highlighted by the United Nations Population Fund (2023), underscores the disproportionate vulnerability of elderly women, who often face cumulative disadvantages including economic dependency, widowhood, and social exclusion. The absence of gender-sensitive provisions within the legal framework limits its effectiveness in addressing these structural inequalities.

Perhaps the most fundamental challenge lies in the changing socio-economic context of Indian society. Urbanization, migration, and the rise of nuclear and dual-income households have significantly weakened traditional family-based care systems (Rajan & Kumar, 2003). The opportunity cost of caregiving has increased, particularly for women, making it difficult to sustain long-term care arrangements within families. As socio-legal scholars argue, law can mandate financial obligations but cannot compel emotional engagement, physical presence, or interpersonal care (Menski, 2006). This highlights the inherent limitations of legal enforcement in addressing the complex and deeply personal nature of caregiving relationships.

In light of these challenges, the study underscores the need for a reimagined and integrated approach to elderly care in India. Moving beyond the binary of family versus state responsibility, a shared responsibility model is essential. This model should involve families providing care where feasible, the state ensuring financial security, healthcare, and institutional support, and communities fostering social inclusion and engagement. Such an approach aligns with global best practices and recognizes that sustainable elderly care requires a combination of legal, social, and institutional interventions. The observations of the Supreme Court of India in *Ashwani Kumar* serve as a reminder of the State’s constitutional obligations toward its ageing population.

7. Policy Recommendations

The analysis of elderly care in India highlights the urgent need for comprehensive policy reforms that integrate legal, social, economic, and institutional dimensions to bridge the gap between legislative intent and practical outcomes. Key legislative amendments should include removing or revising the ₹10,000 maintenance cap under the MWPSCA to allow need-based determinations, expanding the definition of “children” to include daughters-in-law and sons-in-law in line with social realities, mandating the establishment of old-age homes by replacing

discretionary language with binding obligations, and clarifying provisions to permit legal representation for improved access to justice (Dutta, 2021; Jain, 2018; Rajan et al., 2019). Pension reforms are equally critical, requiring a shift from BPL-targeted schemes to a universal or near-universal system with enhanced benefits of at least ₹3,000 per month, indexed to inflation, as recommended by the World Bank (2022), to ensure financial security and dignity. Strengthening implementation mechanisms through fully functional Maintenance Tribunals, appointment of trained Conciliation Officers, establishment of a National Elderly Commission, and mandatory reporting systems would enhance accountability and efficiency (HelpAge India, 2022). In the healthcare sector, expanding geriatric infrastructure through dedicated units in district hospitals, mobile health services, home-based care, and integration of geriatric training into medical education is essential, in line with guidance from the World Health Organization (2021). Gender-sensitive measures must address the specific vulnerabilities of elderly women, including targeted support for widows, recognition of unpaid care work, and specialized social services, as emphasized by the United Nations Population Fund (2023) and Duflo (2012). Finally, awareness and capacity-building initiatives—such as nationwide campaigns, stakeholder training, establishment of legal aid clinics, and promotion of digital literacy—are crucial for empowering senior citizens and ensuring effective access to rights and services, thereby fostering a holistic and inclusive framework for elderly welfare in India.

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