

Health Problems of Aged and Scope for Social Work Practice: A Review

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Abstract

Ageing is a universal biological and social process associated with progressive decline in physical, psychological, and social functioning. The increasing life expectancy and declining fertility rates have led to a rapid rise in the elderly population across the world, especially in developing countries like India. According to Census 2011, India had 104 million persons aged 60 years and above, constituting 8.6% of the total population (Government of India, 2011). The elderly commonly suffer from chronic diseases such as hypertension, diabetes, arthritis, cardiovascular diseases, visual impairment, hearing loss, depression, dementia, and disability. These problems are often aggravated by poverty, loneliness, social isolation, neglect, and inadequate access to healthcare services. In India, modernization, urbanization, and weakening of the joint family system have further increased the vulnerability of older persons. Social work practice plays a vital role in addressing these multidimensional issues through counselling, advocacy, rehabilitation, community organization, and policy implementation. This review article examines the major health problems of aged persons and explores the scope of social work practice in improving their quality of life. It emphasizes the importance of integrated geriatric care for promoting healthy, active, and dignified ageing.

Keywords

Ageing, Elderly Health, Geriatric Problems, Social Work Practice, Healthy Ageing, Elderly Care, Senior Citizens, India

Introduction

Ageing is a natural and inevitable stage of human life characterized by gradual decline in physical strength, mental capacity, and social functioning. It is both a biological and social phenomenon that affects individuals, families, communities, and society as a whole. Advances in healthcare, sanitation, and nutrition have significantly increased life expectancy, resulting in a rapid growth of the elderly population worldwide (World Health Organization [WHO], 2021). In India, persons aged 60 years and above are considered elderly. According to Census 2011, India has 10.38 crore elderly persons, accounting for 8.6% of the total population (Government of India, 2011). Among them, 5.27 crore are women and 5.11 crore are men, and nearly 71% of

elderly people live in rural areas (Ministry of Statistics and Programme Implementation [MOSPI], 2016). The elderly population is projected to increase to 17.32 crore by 2026 and nearly 20% of the total population by 2050 (United Nations Population Fund [UNFPA], 2023). Ageing is often associated with multiple chronic illnesses, disability, dependency, emotional stress, and social neglect. Common health problems include hypertension, diabetes, arthritis, cardiovascular diseases, respiratory disorders, visual impairment, hearing loss, depression, and dementia (WHO, 2021). Social isolation, widowhood, financial dependency, and lack of family support further worsen elderly well-being.

Traditional Indian society valued and protected older persons within the joint family system. However, urbanization, migration, industrialization, and changing family patterns have weakened these support systems, leading to loneliness, neglect, and elder abuse. In this context, social work practice becomes highly relevant in ensuring dignity, care, and social justice for senior citizens.

Need and Significance of the Study

The rapid increase in the elderly population has made geriatric health a major public health and social welfare concern. Older persons often suffer from multiple diseases simultaneously and require continuous medical attention, emotional support, and social security. Unfortunately, many elderly people, especially in rural areas, remain neglected due to poverty, poor healthcare access, lack of awareness, and family breakdown.

According to Census 2011, about 53,76,619 elderly persons were living with some form of disability, representing 5.18% of the elderly population (Government of India, 2011). Disabilities such as visual impairment, hearing loss, locomotor problems, and functional dependency increase the burden on families and institutions.

This review is significant because it views ageing not only as a medical issue but also as a social problem requiring multidisciplinary intervention. It highlights the importance of professional social work practice in addressing physical, psychological, social, and economic challenges of the elderly.

Objectives of the Review

- To examine the major health problems faced by aged persons
- To understand the psychological and social problems associated with ageing
- To analyze healthcare challenges among elderly people in India

- To explore the scope of social work practice in geriatric care
- To identify research gaps and suggest suitable recommendations

Methodology of Review

This review article is based on secondary data collected from books, research journals, government reports, census publications, WHO reports, and policy documents related to elderly health and social work practice. Literature was selected from national and international studies focusing on geriatric health, elderly welfare, disability, mental health, and community care.

Important policy documents such as the National Policy on Older Persons, Maintenance and Welfare of Parents and Senior Citizens Act (2007), National Programme for Health Care of the Elderly (NPHCE), and Atal Vayo Abhyuday Yojana (AVYAY) were also reviewed. The study primarily focuses on the Indian context while incorporating global perspectives where necessary.

Review of Literature

Ageing has become one of the most significant demographic and social issues across the world, particularly in developing countries like India, where the elderly population is increasing rapidly due to improved life expectancy and declining fertility rates (World Health Organization [WHO], 2021; United Nations Population Fund [UNFPA], 2023; Government of India, 2011). Numerous studies have shown that ageing is closely associated with multiple physical, psychological, economic, and social health problems that significantly affect the quality of life of older persons (Binstock & George, 2011; Kumar, 2018; HelpAge India, 2022).

The World Health Organization identifies hearing loss, cataracts, refractive errors, osteoarthritis, chronic obstructive pulmonary disease, diabetes, depression, and dementia as the most common health conditions affecting older adults (WHO, 2021). WHO (2021) further explains that ageing increases the risk of frailty, falls, urinary incontinence, delirium, and other geriatric syndromes that reduce functional independence and increase dependency. Binstock and George (2011) explain that the ageing process weakens immunity, decreases muscle strength, reduces physical mobility, lowers adaptability, and increases susceptibility to chronic diseases and disabilities. Similarly, Sharma and Raju (2015) found that hypertension, diabetes, arthritis, cardiovascular diseases, and visual impairment are the most prevalent illnesses among elderly people in India. Kumar (2018) also reported that multiple morbidities become more common

after the age of sixty and are strongly associated with dependency, poor mobility, social withdrawal, and reduced quality of life (Sharma & Raju, 2015; Kumar, 2018; Rao, 2019).

Studies focusing on rural elderly populations reveal that access to healthcare remains a serious challenge, especially for poor and dependent older adults (Yadav & Singh, 2017; Rajan & Kumar, 2016; Patel, 2020). Yadav and Singh (2017) found that older persons in rural India face barriers such as poor transportation, lack of nearby hospitals, shortage of doctors, irregular medicine supply, high treatment costs, and delayed diagnosis. Rajan and Kumar (2016) similarly observed that rural elderly people often postpone treatment because of financial dependency, family neglect, and low awareness regarding preventive healthcare. Lal and Devi (2019) reported that elderly women in rural households are more vulnerable because of widowhood, illiteracy, poverty, and social neglect. Their study emphasized that older women often depend entirely on family members for treatment decisions and financial support, which delays timely healthcare utilization (Lal & Devi, 2019; Rajan & Kumar, 2016). Patel (2020) found that awareness regarding government welfare schemes and geriatric health services is significantly lower among rural elderly populations compared to urban senior citizens. Devi and Lakshmi (2020) also reported that elderly women in villages are less likely to seek healthcare independently because of traditional gender norms, economic dependence, and restricted mobility (Patel, 2020; Devi & Lakshmi, 2020).

Mental health problems among elderly persons have also received major attention in gerontological research because emotional well-being plays a crucial role in healthy ageing (Patel & Singh, 2017; WHO, 2021; Joseph & Kumar, 2019). Patel and Singh (2017) found that depression, anxiety, loneliness, emotional insecurity, and sleep disturbances are highly common among older adults, especially among widowed persons, those living alone, and residents of old age homes. WHO (2021) identifies depression and dementia as major contributors to disability and dependency in old age. Joseph and Kumar (2019) reported that elderly persons with regular family interaction, emotional support, and active participation in community life show better mental health and greater life satisfaction. In contrast, elderly persons who experience neglect, abandonment, and social isolation are more likely to develop depressive symptoms and anxiety disorders (Joseph & Kumar, 2019; Ramesh & Rao, 2020). Ramesh and Rao (2020) found that widowed elderly women experience greater psychological stress than elderly men because of loneliness, social exclusion, and financial dependence. Thomas and Joseph (2021) also reported

that elderly persons living in old age homes often suffer from emotional dissatisfaction, helplessness, and identity loss despite receiving food and shelter (Thomas & Joseph, 2021).

Several studies have emphasized that elderly women experience greater vulnerability than elderly men due to gender-based inequalities throughout the life course (HelpAge India, 2022; Kaur & Kaur, 2018; Sharma, 2021). HelpAge India (2022) reported that older women frequently face widowhood, financial dependency, poor access to healthcare, and limited decision-making power within families. Kaur and Kaur (2018) found that osteoporosis, arthritis, hypertension, and depression are more common among elderly women due to poor nutrition, reproductive health burdens, hormonal changes, and prolonged caregiving responsibilities during earlier stages of life. Sharma (2021) observed that widowed elderly women are at greater risk of neglect, abandonment, and poverty because of weak pension support, lack of property rights, and absence of family protection. Prasad (2021) also noted that elderly widows are more vulnerable to emotional neglect and financial exploitation because they often lack independent income and legal awareness (Sharma, 2021; Prasad, 2021).

Nutrition and physical weakness are also major concerns among aged persons, especially among poor households and socially isolated older adults (Verma, 2018; Singh & Patel, 2020; Narayan, 2021). Verma (2018) found that malnutrition, anemia, weakness, low body weight, and reduced immunity are common among elderly persons, particularly widowed women and those living alone. Poor nutrition increases the risk of chronic disease progression, delayed recovery, reduced resistance to infection, and physical dependency (Verma, 2018; Singh & Patel, 2020). Narayan (2021) observed that elderly persons who live alone are more likely to skip meals, suffer from poor appetite, and develop nutritional deficiencies due to loneliness and lack of family care. Elder abuse and neglect have also emerged as serious social issues affecting older persons in both urban and rural settings (Saxena & Mishra, 2019; HelpAge India, 2022; Prasad, 2021). Physical abuse, emotional neglect, financial exploitation, verbal humiliation, and abandonment are increasingly common among elderly persons, particularly those who are financially dependent or physically weak (Saxena & Mishra, 2019; Reddy, 2020).

Social work interventions have been consistently identified as essential in improving elderly welfare and promoting healthy ageing because elderly problems are multidimensional and require more than medical treatment alone (Mohan & Devi, 2022; Sharma & Joseph, 2020; Bhatia, 2021). Mohan and Devi (2022) emphasized that counselling, family mediation,

rehabilitation support, pension guidance, awareness of welfare schemes, and emotional assistance significantly improve elderly well-being. Sharma and Joseph (2020) found that professional social workers help older persons access pensions, healthcare services, legal aid, disability benefits, and psychosocial support, thereby reducing dependency and improving life satisfaction. Bhatia (2021) reported that group work and community organization among senior citizens improve social participation, self-confidence, and emotional well-being while reducing loneliness and depression. Overall, the review of literature clearly shows that elderly health problems are multidimensional and deeply interconnected with economic insecurity, family relationships, healthcare accessibility, gender inequality, disability, and social support systems (WHO, 2021; HelpAge India, 2022; Kumar, 2018). A holistic approach involving healthcare services, family support, legal protection, community participation, welfare policies, and professional social work practice is essential for ensuring active, healthy, and dignified ageing (Mohan & Devi, 2022; Sharma & Joseph, 2020; WHO, 2021)..

Theoretical Framework

This review is based on Activity Theory and Disengagement Theory of Ageing, which help in understanding the social and psychological experiences of elderly persons. Activity Theory suggests that successful ageing occurs when older adults remain active, socially engaged, and involved in meaningful roles within the family and community. Continued participation in social relationships, family responsibilities, community programs, religious activities, and senior citizen groups improves mental health, self-esteem, and life satisfaction. Elderly persons who remain active are less likely to experience loneliness, depression, and feelings of uselessness. This theory emphasizes that ageing should not be seen as complete withdrawal from life, but as a stage where continued engagement supports healthy and dignified living.

Disengagement Theory explains that ageing involves a gradual withdrawal from social roles, responsibilities, and relationships due to retirement, declining health, reduced physical strength, and changing family structures. Some level of withdrawal may be natural; however, forced social isolation can negatively affect emotional well-being and lead to depression, anxiety, and low self-worth. Elderly persons who are neglected by family members or excluded from social participation often suffer greater psychological distress. Social work practice supports Activity Theory by promoting active ageing, empowerment, and social inclusion while also addressing the negative effects of harmful disengagement. Through counselling, family

intervention, community participation, and rehabilitation services, social workers help older adults maintain dignity, emotional security, and a better quality of life..

Conceptual Understanding of the Topic

Health problems among aged persons are multidimensional and include physical, psychological, emotional, and social difficulties that arise due to ageing, chronic illness, reduced functional capacity, and changing family and social environments. Common physical problems such as hypertension, diabetes, arthritis, cardiovascular diseases, visual impairment, hearing loss, osteoporosis, weakness, and mobility limitations reduce independence and increase dependency on others. Mental health issues like depression, anxiety, dementia, loneliness, emotional insecurity, and memory loss are also widespread, particularly among widowed, neglected, and socially isolated elderly persons. Social problems such as elder abuse, financial dependency, neglect, abandonment, and exclusion from family and community participation further affect their dignity and quality of life. Social work practice plays an important role in addressing these challenges through counselling, case management, rehabilitation, advocacy, family support, and awareness of welfare schemes and legal rights. Social workers help older adults access healthcare, pensions, social security benefits, and institutional support while promoting active ageing, social inclusion, emotional well-being, and dignity. Previous studies confirm that chronic diseases and mental health problems are highly prevalent among the elderly, especially among women, rural populations, and financially dependent senior citizens, while limited awareness of welfare schemes and inadequate geriatric social work services continue to weaken effective elderly care and support systems (World Health Organization [WHO], 2021; HelpAge India, 2022; Ministry of Statistics and Programme Implementation [MOSPI], 2016).

Research Gaps Identified

Many studies on ageing mainly focus on physical and medical problems such as chronic diseases, disability, and healthcare needs, while giving less attention to psychosocial issues like elder abuse, neglect, loneliness, emotional insecurity, and mental well-being. Research on rural elderly mental health remains limited, especially regarding depression, social isolation, and lack of family support. There is also insufficient evidence on the role and effectiveness of community-based social work interventions for elderly care. Studies examining professional geriatric social work services in hospitals, old age homes, rehabilitation centres, and day-care centres are still inadequate. More interdisciplinary research is needed to connect healthcare

services, social welfare policies, and professional social work practice. Such studies can help improve service delivery, policy implementation, and overall quality of life for elderly persons..

Discussion

Ageing should be understood as both a health issue and a social issue because the challenges faced by elderly persons go beyond physical illness and affect their emotional well-being, financial security, family relationships, and social participation. With increasing age, many older adults experience chronic health problems such as hypertension, diabetes, arthritis, heart disease, visual impairment, hearing loss, and reduced mobility, which limit independence and increase dependency on others. Mental health concerns such as depression, anxiety, loneliness, memory loss, and emotional insecurity are also common, especially among widowed, neglected, and socially isolated elderly persons. At the same time, social problems like elder abuse, financial dependency, neglect, abandonment, and exclusion from family and community life further reduce their dignity and quality of life. The decline of the traditional joint family system due to urbanization, migration, and modernization has weakened family support, making many elderly persons more vulnerable and increasing the need for external support systems.

A holistic approach to elderly care is necessary, involving physical health, emotional security, financial protection, and active social participation. Government welfare schemes such as old-age pensions, healthcare services, senior citizen welfare programmes, and legal protections exist to support the elderly, but poor awareness and weak implementation often reduce their effectiveness, especially in rural areas. Social workers play a crucial role in bridging these gaps by helping older persons access healthcare, pensions, counselling, rehabilitation services, and legal rights. They also provide family counselling to improve relationships between generations and reduce neglect and emotional stress within households. Community participation through senior citizen groups, health camps, and social support networks further helps older adults remain active, respected, and socially included. Through combined efforts of families, communities, governments, and professional social workers, active ageing and better quality of life for elderly persons can be successfully promoted.

Implications for Practice

Social workers must actively participate in hospitals, old age homes, NGOs, rehabilitation centres, and community health programs. They should provide counselling, crisis intervention, family mediation, rehabilitation, and discharge planning. Community-based elderly

care services should be strengthened to reduce dependency and improve social inclusion. Awareness programs regarding legal rights, government schemes, and healthy ageing should be expanded. Interdisciplinary collaboration among doctors, nurses, psychologists, and social workers is essential for comprehensive geriatric care.

Suggestions

There is a strong need to strengthen geriatric healthcare services at primary health centres so that elderly persons can receive timely diagnosis, treatment, and regular health monitoring at the community level. Increasing awareness regarding welfare schemes, pensions, healthcare benefits, and legal rights of senior citizens is essential to ensure that older adults can access available support systems effectively. Community-based rehabilitation services and day-care centres should be promoted to reduce dependency, provide emotional support, and encourage social participation among the elderly. Family counselling and intergenerational support programs are also important for improving family relationships, reducing neglect, and creating a supportive home environment for older persons.

Specialized training in geriatric social work practice should be developed for social workers so that they can effectively address the physical, psychological, and social problems of the aged population. Improving pension security and financial protection measures is necessary to reduce economic dependency and ensure dignity in old age, especially for widows and poor elderly persons. More research should also be conducted on elderly mental health, depression, dementia, loneliness, and elder abuse prevention, particularly in rural areas where such issues often remain hidden. A multidisciplinary and policy-oriented approach is essential for promoting healthy, active, and dignified ageing.

Conclusion

Ageing is a natural and unavoidable stage of human life, but the problems associated with old age require serious attention from families, communities, healthcare systems, and governments. Elderly persons face multiple physical, psychological, emotional, and social challenges such as chronic illness, disability, depression, loneliness, financial dependency, neglect, and social exclusion, all of which affect their dignity, independence, and overall quality of life. As life expectancy increases and traditional family support systems weaken, the need for comprehensive elderly care becomes even more important.

Social work practice plays a vital role in addressing these multidimensional problems through counselling, advocacy, rehabilitation, family intervention, welfare services, and policy implementation. Social workers help elderly person's access healthcare, pensions, legal protection, emotional support, and community participation, thereby promoting active and dignified ageing. Healthy ageing requires not only medical treatment but also emotional security, social inclusion, financial stability, and respect for the rights of senior citizens. A society that protects, values, and supports its elderly population ensures justice, humanity, and sustainable development for all generations.

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