Editorial

Breaking the silence: Addressing emotional neglect in India's aging population

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India is witnessing a meaningful demographic transition with a geriatric population increasing steadily. Older adults pose challenges that are multidimensional given the scope of geriatric mental health differs from other domains of mental healthcare because of needs that are unique: physiological, psychological, and social. People can recognize and also accept mental health issues, then seek out some help, and next adhere to any treatment. These challenges manage mental health also in the long term, spanning the entire continuum of care.

Critical barriers to progress include trained professionals being in short supply, dedicated geriatric mental health infrastructure being of a limited nature, and this particular sector not receiving an amount of financial investment that is enough. With timely intervention, many geriatric mental health disorders can be accurately diagnosed and effectively managed. These disorders get falsely assigned to "normal aging," causing care delays. Geriatric mental health, positioned as an emerging public health priority for India, stems from this misconception coupled with population aging's rapid pace.

1. Key Social Challenges Faced by the Elderly Population in India

India's aging population is confronted with several distinct social challenges that complicate efforts to ensure their well-being and care:

1. Rural concentration: Approximately 80% of the elderly population resides in rural areas, where access to healthcare, social services, and geriatric support remains limited, making service delivery particularly challenging.
2. Inadequate pension coverage: Government pension schemes currently benefit only around 2.76 million out of an estimated 28 million elderly individuals, with coverage skewed toward urban populations.
3. Feminization of aging: Women constitute about 51% of the elderly population, reflecting a feminization of aging. This trend has significant implications, as elderly women are more likely to be widowed, financially dependent, and socially marginalized.
4. Rising "Oldest-Old" demographic: There is a notable increase in the population of those aged 80 and above, who typically have higher physical and mental health needs, further straining caregiving systems.
5. High poverty rates: Nearly 30% of India's elderly live below the poverty line, severely restricting their access to nutrition, healthcare, housing, and social security.

These factors collectively highlight the urgent need for targeted policy interventions and social support mechanisms to address the unique vulnerabilities of India's aging population.

2. Conclusion

The global population is aging at an unprecedented rate. Between 2015 and 2050, the proportion of individuals aged 60 years and above is projected to nearly double—from 12% to 22%. In absolute terms, this reflects a rise from approximately 900 million to 2 billion older adults

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worldwide. This demographic shift brings with it a host of complex physical and mental health challenges that must be proactively addressed.

Among older adults, mental health concerns are often under-recognized both by healthcare professionals and by the individuals themselves. Stigma surrounding mental illness further exacerbates the problem, discouraging many from seeking timely help. In India, the situation is compounded by several systemic issues: limited awareness, inadequate professional training, unequal distribution of healthcare resources, and a near absence of structured models for managing chronic mental health conditions in older populations.

Although government policies offering social benefits to the elderly do exist, they suffer from limited coverage and insufficient implementation. To effectively address the mental health needs of India's geriatric population, a multi-pronged approach is essential. This includes increasing public and professional awareness, building human resource capacity, strengthening training and research in geriatric psychiatry, and expanding community-based rehabilitation programs. Additionally, integrating mental health into a holistic primary healthcare system is crucial.

Raising awareness about the unmet needs of older adults, developing skilled professionals, and fostering inter sectoral collaboration are vital next steps. There is an urgent need to implement and strengthen national policies, programs, and legislation focused on geriatric mental health—while simultaneously promoting advocacy, inclusion, and empowerment of the elderly. Incremental progress across all these fronts will collectively contribute to a significant improvement in the mental health and overall quality of life of India's aging population.

3. Conflict of Interest

None.

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