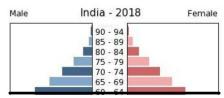
INDIAN ASSOCIATION of AGE MANAGEMENT ADDING L) fe TO YEARS REGD: 2009

Chairman Dr VP Bansal 9971133868
President: Dr Suresh Bansal 9872009069
Email: <contact@agamanagementindia.com>
Block C, Community Centre, Naraina Vihar
New Delhi 110028

Baby boom is over in most of the countries of the word, and mostly are a-heading toward aged population. The young India today is going to loose its sheen soon, and by another 20 to thirty years aging people population will increase many fold. Age affects both body and mind, however it carries a wide horizontal knowledge with it which is of immense value in those, who keep fit and contribute a lot to the family affairs, social cause and nation building.



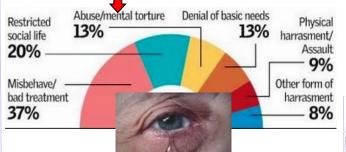
In our country this issue is not rosy, where in apart from morbidity issues like social hand holding and care are lacking and interpersonal bonds are getting weak. More so in aged population living in country side and more in females. They are left to no where, forced to live life in despair, frustration, depression; not even making both ends meet with poor care by thier own and society. Good number of them are wonderful people in good health with academic and technical skills but to hoods.



The National **Social Assis**tance Program (NSAP) is a Centrally Sponsored Scheme of Government of India that provides financial assistance to elderly. widows and persons with disabilities in form of social pensions. MANY OLD PEOPLE ARE FORCED TO LIVE WITH HUMILIA-TION, ABUSE, **ISOLATION &** DESPAIR HINDU

Aging is reality and a stage of life, wherein such persons do need nutritional, financial, psychological, emotional care apart from just words of empathy, respect and **appreciation**. We all need to look into it and put possible help at our individual levels to make the things meaningfully lived. Number of domiciliary palliative measures and indentifying common diseases of old age well advance in time along with medical care provided by family, NGOs, social justice and empowerment government bodies can go long way reducing morbidity and mortality in this age group. And all this exercise is surely not

like fighting a lost war, but making the things workable senior citizen needs living in grace, getting rehabilitation and becoming an asset to one and all before exit.



Indian Association of Age Management Summary

- Making of members of constitutional body
- ☐ Constitution of the Association
- □ Selection of Executive body
 □ Bank account & its
- operation

 Making of Regional
 Groups in India

MANAGEMENT PRE-REQUISITES

Age awareness- diversity & needs

Careful planning and implementation

Co-operation of all parties concerned

Continuous communication

Internal and external health monitoring

National, Regional and local governments support

Social partners & Rehab

Executive Body meet every two months,

in old age homes- online guidance

Elected Administrative body: tenure two years

national - international NGO/ Govt. interaction,

Funding: Annual meets, Pharmacy & Volunteer

participation, membership fee, subsidized clinics

Interaction with other NGO's & participation bodies participation a holistic approach that encompasses all dimensions of age management

ORGANISATIONAL DRIVERS

GERIATRIC SKILLS, HORIZONAL > VERTICAL KNOWLEDGE BANKS

Retaining older workers, avoiding expensive loss of skills - which may increase market share

Community center/ old age home - free academic - skill learning schools (precise & need based)

- Domiciliary Task Force certificate courses; with Indian Red Cross/ open universities
- Self-help group, rehabilitation learning, training and redeployment
- Online Registration awareness / planning and free palliative measures literature
- Blog; Senior citizen / ageing parson's internal intra action, financial management and legal guidance



with his charted accountant son with 2 months history of social withdrawal, abnormal behavior, aggressivity and suicidal ideas. Comorbid with aging was controlled hypertension—while he was independent for activities of daily living. One night he was found with knife to kill his wife—on asking the reason, not speaking much said I will kill myself lying before the moving Making contact with patient, empathy he came out he has been made idle by their children, pear company loosed and has nothing to do. With fear his wife will not be taken care of nicely after him—he wanted to finish both. Family/ patient counseling and anti-depressant cured him." almost Our elders senior citizen needs hand holding, respect, vour time—about an hour a day & graceful living.

A "72 years person forci-

bly retired as commission

agent, reported to me

Zee News Elderly continue to suffer

ABOUT THE ASSOCIATION

Administration: This will comprise of Patron, President, Secretary, Joint Secretary, Treasurer (minimum MD/MS qualification). Their tenure will be of two years, elected by the medical permanent and annual members

Executive Body: With total of seven members, five from medical doctors, one from Associate members and one from Honorary members. Five members will be elected by permanent & annual medical members, while one each will be elected by the Associate and honorary members

Meetings/ conferences: There will be executive body meet every three months- while general body meet once a year. In coming time there will be regional chapters of the association who can deliver the best on regional demands.

National / International interaction: Out of thousands only few dozens of such NGO are active in one or the other filed of aged population care. To begin with we are contacting Help-age India, Senior Citizens/ we are above 60 Face Book Groups, Tata Trusts elder care, Social welfare dept. Senior Citizen Division Govt. of India, AMAR

Membership fees:

Doctor Life member: 5000/- one time Doctor Annual Member: 1500/- per year Associate Life member 2000/- one time Associate yearly member 750/- per year Honorary members for 2 years No fee

FUNDING (Need)

India has about 112 million elderly people with multiple physical, social psychological, and economic problems needing help in all domains of health.

- million suffer dementia
- million suffer from poor vision
- 16 million annual stroke cases
- 1 in 3 suffer from arthritis
- 1 in 3 has hypertension
- 1 in 5 has diabetes
- 1 in 5 has auditory problems
- 1 in 4 suffer from depression
- 1 in 10 falls and sustains a fracture

Our Government Income security

A major intervention relates to financial insecurity as more than two third of the elderly live below the poverty line and increases with age. Old age pension scheme cover all senior citizens living below the poverty line. Monthly pension would be raised to Rs.1000 per month per person and revised at intervals to prevent its deflation due to higher cost of living.

The "oldest old" would be covered under Indira Gandhi National Old Age Pension Scheme (IGNOAPS). Reviewed every 5 year they would be provided additional pension in case of disability, loss of adult children and concomitant responsibility for grandchildren and women.

Taxation policies would reflect sensitivity to the financial problems of senior citizens which accelerate due to very high costs of medical and nursing care, transportation and support services needed at homes. Loans at reasonable rates of Interest for rehab.- start small businesses.

INDIAN ASSOCIATION OF AGE MANAGEMENT **IAAM**



Annual meet, Pharmaceuticals, Geriatric domiciliary care training, Membership fees, Subsidized clinics, Philanthropy, donations

TRAINING DOMICILIARY CARE PROFESSIONAL OF THE AGED PERSONNELS

There are many reasons which affect the aged population more in the country side region, main being inadequate finances, social abuse, almost non existing geriatric medical

care for various common diseases. Good numbers of aged person do have locomotion disorder, transport problems, memory impairment, dental diseases, vision and hearing deficits, behavioral abnormalities and dependence for activities of daily living. Their well educated, nicely placed children rarely concern them, even if they do is more of



face work- rather than giving their help of various kinds and above all little time for hand holding and emotional hygiene. There comes the role of OLD AGE HOMES, NGOs, Social & Empowerment Government Agencies and partially financial help by philanthropologist. Aged persons advanced age with co-morbidities further complicates the situation wherein there is almost a complete surrender by the family members and care takers and they are left to live in hell.



The association plans to raise a TASK FORCE of young dynamic persons to take up this challenge of domiciliary care in aged with locomotion assistance, nursing care like putting Ryle's Tube, Giving IV injections, Enemas, bed sore care, monitoring homeostatic issues—fever, intake/ output, fluid

intake, special diets, nutrients and medicines well in time. It is planned to train such like personnel's for 6 months 9(a certified course); along with attachment to a 100 bedded hospital in assistance with Indian Red Cross / Open university like IGNOU. Execution of this activity will be done by a sub group of the Association.

There will be a dedicated curriculum with active training and back ground theoretical knowledge with seminars and symposia. Candidates will have to pass a formal clinical/ theory test

AGED PERSONAL & THEIR CARE TAKER

- ♦ Free registration with the association: where in they will get online soft copies of essentials of age management including pre-aging, aging, domiciliary, palliative and hospital care; Patient education about aging process and its affect on various organs of the body. How to delay the disease process and make best reserve & hygiene of the body organs.
- ♦ At Regional/ State / District levels—Sub Group of As**sociation** fulfilling the above activities.
- ◆ To inform about the latest breakthrough in the age management measures and therapeutics
- ◆ Encourage their active participation in their interpersonal groups, community living, social- festive get together, using their wide horizontal academic and technical knowledge for rehabilitation.
- ♦ A blog—white paper where this registered group interacts amongst themselves as well as with the management fraternity
- ♦ They can have their elected representative who can actively participate in **PATIENT CHAPTER** of the annual meet of Indian Association of Age Management

Secrets and tips for healthy aging:

- ◆ Fuel Your Body Righteously: Eat healthy, plenty of fluids, fiber, Calcium and electrolytes
- ♦ Find Your Passion and Focus on prevention. ...
- ◆ Establish Proper Sleep
- ◆ Remember mental health, mental exercise, Socialize, MIND UNUSED IS MIND LOSSED
- ♦ Get Moving & Stay physically active.
- ♦ Find Happiness & Reduce Stress. ...
- ♦ Screen for vision changes. ...
- ♦ Quit Sabotaging Your Well-Being. ...
- ♦ Get information on medication management....

