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Happy Aging in India: The Role of Cultural Norms and Values

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Abstract

Aging is a culturally embedded, complex, and multidimensional process. India, as a culturally diverse nation with traditional practices and social norms, meaningfully contributes to the aging experience and life satisfaction of the elderly. This review article presents a comprehensive examination of the cultural structures that affect the well-being of elderly individuals in various parts of India. By synthesising the literature, this article contends the multifaceted interaction between familial structures, social relations, religious beliefs, and the impact of modernisation on the aging process. The article presents novel knowledge regarding how cultural values and traditional practices construct the concept of "happy aging" in the Indian context, focusing on cultural attitudes' contribution to elderly life satisfaction.

Keywords: *cultural perspectives, happy aging, elderly life satisfaction, India, traditional practices, cultural values.*

Introduction

India is currently undergoing a "seismic demographic shift" with a rapidly aging population, despite the country's huge youth dividend which is, in fact, the largest in the world. This would translate into complex ramifications in the form of social and economic transformation as well as change in the cultural fabric of the nation. As per the estimates of the United Nations, the proportion of India's population under elderly age groups is expected to increase from 10% in

2015 to 19.5% in 20250, meaning India would soon set to enter the league of fastest aging nations like Japan, Portugal, Italy, etc (NITI Ayog, 2024). As the population of older persons increases, it is essential to study the complex interplay between cultural factors and the aging process. It is pertinent here to restate the World Health Organization's (WHO) emphasis on the attributes like "life satisfaction as among the most important determinants of mental and physical health" in the elderly and necessitating an integrated understanding of the cultural nature of aging (World Health Organization, 2023). For life fulfilment, we can consider social support, physical health, cognitive function, and psychological well-being. Notably, the cultural parameters could be understood as one of the crucial contexts surrounding older individuals in shaping their attitudes and experiences of aging. In Indian societies, which are known for their deep emphasis on communal and family ties, the overarching impacts of traditional values and practices on aging are invariably taken due consideration. India's rich tapestry of cultural pluralism and the multiplicity of its diverse regional traditions, social norms, and religious affiliations, can offer a unique premise to study the intersections of culture and aging. For instance, the centrality of Hinduism's belief system and lifestyle ethos attached to the principles of *dharma* (duty) and *karma* (action) could meaningfully influence the ways older persons perceive their roles and responsibilities within family and community (Tiwari & Pandey, 2013). In Indian context, it is also pertinent to unavoidably regard the intersectionality of caste, class, and gender while examining aging from the perspective of social construct. one should not undermine the marginalized experiences of older individuals, then; those from the Dalits and Adivasis connote specific concerns and vulnerabilities that have been shaped by the particular social and cultural milieu. Accordingly, a culturally sensitive and informed position is necessary in approaching the experience of aging in India. This review attempts to synthesize existing knowledge on the cultural dimensions of aging in India, drawing on evidence from research papers, reports, and ethnographic studies. Through an examination of the complex

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interrelations between cultural traditions, norms, and life satisfaction among India's older demographic groups, this review attempts to shed light on the determinants of healthy aging and well-being in India.

Theoretical Framework: Understanding Happy Aging in the Indian Context

Happy aging must involve a multifaceted approach from interdisciplinary perspectives that understand the concept as a complex and multidimensional phenomenon by encompassing cultural sociology, gerontology, and positive psychology. For the present study, the premise has been contextualized from the review of theoretical models that establish the paramount significance of cultural context in shaping the aging experience.

Cultural Dimensions of Successful Aging

Rowe and Kahn's model of successful aging provides a theoretical framework for the definition of happy aging. It should be noted that successful aging largely relies on the cultural setting where it occurs. Estebansari et al. (2020) state that the definition of successful aging would have varying connotations and interpretations in various societies and therefore the necessity to consider the cultural context when studying this phenomenon. In the Indian context, it is necessary to note the impact of the traditional principles of *dharma* (duty), *karma* (action), and *moksha* (liberation) on the perceptions of older people regarding the roles and responsibilities they have within the family and society (Tiwari & Pandey, 2013). To analyse the impact of Indian traditions on elder well-being, the present study employs several theoretical perspectives:

Social relationships and social networks in a community play a substantial role in promoting healthy aging in accordance with Social Capital Theory (Bourdieu, 1986). Social capital in the Indian setting is primarily facilitated through traditional institutions such as the joint family structure and community organizations. The institutions foster feelings of belongingness, supportiveness, and reciprocity, all the major components of social capital. Exploring the place of social capital in the Indian setting will enable us to better recognize the role social

relationships and social networks play in healthy aging.

Resilience Theory, as proposed by Luthar and Cicchetti (2000), emphasizes the coping ability and flexibility of the individual and the community in the face of adversity. In the Indian context, certain traditional practices such as yoga, meditation, and rituals with a community base have contributed to a resilience culture. Such cross-generational practices have assisted the elderly in particular in acquiring the necessary coping strategies in the face of the ups and downs in life.

According to the perspective of the Meaning-Making Theory (Park & Folkman, 1997), individuals derive meaning and purpose in life from their life events, relationships, and cultural practices. In the Indian setting, cultural practices such as storytelling, music, and arts are weighty meaning-making channels through which individuals, including the elderly, derive purpose and meaning in life. The practices enable individuals to have a structure through which they interpret and make sense of events in life and achieve a sense of direction and coherence. By synthesizing these theoretical models, we conducted a comprehensive review in order to provide a balanced picture of how Indian traditions shape older adult well-being and inform the concept of happy aging. From this review exercise, we could establish that happy aging is not solely a function of individual characteristics but also of cultural context, interpersonal relationships, and social networks. The theoretical models and concepts, here, connote to the primary understanding of the importance of cultural aspects while ascertaining happy aging in the Indian context. By recognizing the importance of traditional values, social relationships, and cultural practices, policymakers and practitioners can design effective interventions to enable healthy aging and enhance the well-being of older adults in India.

Overview of Aging in India

The United Nations Department of Economic and Social Affairs Population Division estimates the 60 and above age group in India to rise from the last available estimate of 104 million in Vol.6(No.01)April2025toMarch2026(JLLLEG)

the 2011 Census to over 319 million in the year 2050 and represent around 20% of the Indian population (NTI Ayog, 2024). While taking note of this demographic transition, it is equally crucial to examine India's rich and diverse tapestry of cultures, languages, religions, and family structures. India has 22 constitutionally recognized languages, over 1,600 dialects, and a vast diversity of religious and cultural practices. India's population thus reflects a complex diverse multitude of ethnic and socio-economic groups, each with its own very distinctive and strong cultural mores and values. It could also be remarkable to mention here that India social systems always place special emphasis on establishing the society with one that is highly family-centred, with elders living with their extended families wherein there exist certain modes of unspoken norms of respect and authority. The family, as an extended and joint microcosm of members, including kinship and clan-based relationships, is a central social institution wherein several generations have thrived together, sharing familial customs and traditions. Of course, the rapid shifting of values and belief systems among Indians owing to modernization, fast urbanization, as well as globalization and digitalization in contemporary contexts, accompanied by shifting family structures and more reinforcement of nucleation of family structures, are powerfully challenging these traditional expectations. The percentage of the elderly who live alone has grown in the past few decades (Jadhav et al., 2013). Further, the survey revealed that more than 70% of the elderly rely on their own children for financial support, which could mean a vital insinuation for reliability on one's own pension or earnings. As a matter of fact, shockingly one 10% of elderly living alone receive some sort of pension, compared to half of them for those who live with their children (Tripathi, 2022). Social isolation among the elderly is also seemingly rampant, with one study showing the prevalence of social isolation among older people at more than 34% (Kumar et al., 2022). Nearly 58% of elderly persons in India also reported to have not received formal education, as per the data from NSS of 2017-18 (Government of India: Ministry of State Programme Implementation: National Office Social Statistics Division, 2021). A mention can also be made of LASI's (Wave Vol.6(No.01)April2025toMarch2026(JLLLEG)

1) data on disability which reported that 10.5 percent of the total population in India above 60 years of age exhibit at least one physical or mental impairment, which is more than double of overall figures of India's total population with disabilities (Bhandari, 2023).

The figures above reiterate the importance of examining older persons' lived experiences in India's context vis-à-vis its cultural plurality, and unique complex socio-economic realities. With India set to confront challenges associated with a rapid rise in aging population in years to come, policies and programs must be developed in line with older persons' unique needs and interests and in a manner that respects and supports their cultural heritage and values.

Cultural Traditions Influencing Elderly Life Satisfaction

1. Family Structures and Social Support

Traditional Indian families primarily follow a strong lineage tradition of dissemination roles and norms wherein hierarchical structures based on age are sternly defined. Elders command a certain expectation of unconditional respect and reciprocity of authority with the legacy of familial assets like caste identity (where the heirs could use them to maintain their status quo and position in the society), properties and land, etc. This social practice has strong cultural roots in the concept of *sanskaar* (values) and *parampara* (tradition), where elders are also obligated to transfer their experience and knowledge to subsequent generations. The elders, thus, in many respects, could assert their identity by continuously reinforcing the meaning of their lived experience as a figure of respect and authority, but the most central binding factor is the existence of unspoken norms of reciprocity among the members of the family. This enables a system wherein the members live together, imbibing their different roles and altogether building a network of support systems within the family. There is unequivocal evidence to believe that family support systems, including generational co-residence, play an vital role in better mental and emotional health among elders. We could reiterate a study here from Park and Kang (2023), which indicated those social factors that suggestively increased

life satisfaction for older people, such as interacting with friends and children, being involved in hobby club activities and senior citizens community centres, etc. We could infer that elderly people living with their families could thus amount to greater life satisfaction, social support, and emotional health than their isolated peers. When it comes to India, the tradition of intergenerational co-living spaces has continued, with up to three-fourths of elderly people living with their families (Jadhav et al., 2013). This system of shared space and co-living not only ensures care and emotional support but also ensures reciprocal relationships within the family where elders can be engaged in childcare, chores, and household duties. There is a positive correlation between older individuals who engaged in grandchild care and satisfaction with their life overall (Dong et al., 2023).

2. Religious and Spiritual Practices

Religion plays a noteworthy role in the majority of the older people in India with 79.8% belonging to the Hindu religion, 14.2% Muslim and 2.3% Christian (Census of India, 2011). The Hindu concept of "*Dharma*" (duty/righteousness) is very prominent here, where it emphasizes fulfilling one's duty and responsibility to the family, society and nature. There has been evidence that older individuals have experienced greater happiness, peace and contentment in life when they have greater social participation and social support through religious and spiritual engagements (Kandapan et al., 2023). Spiritual practices such as rituals and community engagement are also prevalent sources of social engagement among older people in India. Older individuals who participated in spiritual practices and religion had greater psychological well-being, social relationships and satisfaction with life when compared to the ones who did not follow any (Kaplan, 2025). Spiritual practices in India are mostly community engagement such as attending temple services, prayer group meetings or volunteerism. These engagements act as a source of social interaction, emotional support and belongingness, and are central in maintaining mental and emotional health in older people.

3. Cultural Norms Around Aging

In India, the social belief, ethos, practice and culture place an emphasis on deep-rooted value of respect for elders. The culture of respect is reflected in proverbs and sayings, such as *Guru Devo Bhava* (The teacher is equivalent to God) and *Matru Devo Bhava* (The mother is equivalent to God), that inculcate respect for elders and taking advice from them. Traditional Indian system of elderly respect has been found to be associated with higher life satisfaction, self-esteem, and social support as opposed to the eroding values of such traditions in contemporary globalized India which have been witnessing rapid rise in old age homes and neglect of old age members of family (Joseph, 2023). In Indian culture, the *Guru-Shishya Parampara* (Teacher-Disciple Tradition) also inculcates respect for elders and taking advice from them. The tradition emphasizes the *guru's* (teacher's) role in imparting knowledge, wisdom, and values to the *shishya* (disciple) and suggests the importance given to intergenerational relationships and knowledge transfer.

4. Gender Roles and Aging

Gender relations have a profound influence on the aging experience in India. Traditional roles and societal expectations typically prescribe caregiving roles for women and men as providers and protectors. Both these roles can be sources of stress or satisfaction, or both, depending on the context. For instance, older women in India can be more vulnerable to health problems, social isolation, and economic dependence compared to older men (Ugargol, 2024). We could reiterate a study on widowhood and loneliness by Das et al. (2024) found that older Indian women who were socially isolated and economically dependent had lower levels of life satisfaction and psychological well-being. Older Indian men, by contrast, might derive satisfaction from their patriarchal roles despite changes in family life. However, it should be noted that these traditional gender roles are changing, and many older women and men are adapting to new realities (Srivastava et al., 2022).

Regional Variations in Elderly Life Satisfaction

India's cultural landscape is defined by abundance and multitudes of diverse linguistic groups and ethnic compositions, regional variations, history of composite tradition, a robust interface of syncretised elements of art, religion, philosophy, etc. The vibrancy of India's unique and profound cultural milieu does potentially imply a positive meaning for elderly adults to navigate through the annals of life by involving in various experiences from where they have the opportunities to derive the meaning of existence. In the same light, it is necessary to have a thorough understanding of the regional disparities of elderly experiences in India, taking into account the vast diverse cultural differences across the country, in order to design targeted interventions for healthy aging.

1. North India

We first consider a case from the North Indian states of Punjab and Uttar Pradesh pertaining to the role of traditional joint family systems in contributing to life satisfaction among elderly individuals. In these two states, traditional joint family systems remain a pervasive social institution, with a profound influence on the lives of elderly individuals. Within these family systems, elders tend to have higher life satisfaction, primarily due to the family systems' strong emphasis on ensuring emotional support, respect, and care for elderly members. The data from Government of India Ministry of Statistics and Programme Implementation (2021) identified that over 85% of the elderly respondents in Punjab were residing with their family (either with spouse and children or without spouse but with children or other family relatives) and the corresponding figure for Uttar Pradesh was found to be 83%. Such family co-residence enables the elderly individuals to maintain their social contacts, receive emotional support, and participate in family decision-making, ultimately enhancing their life satisfaction. However, the process of fast rural-urban push and pull migration has contributed to erosion of these traditional family systems, giving rise to the phenomenon of social isolation among the elderly individuals left behind in the rural areas. We could highlight the findings from Alam and Yadav

(2013) who reported that socially isolated elderly individuals in rural Punjab reported psychological well-being compared to their socially engaged counterparts if we consider the difference in General Health Questionnaire (GHQ) score based on Subjective Well-Being Inventory (SUBI) wherein the proportion of those who are widowed scoring below the GHQ threshold level of (≥ 12) was found to be more than those who are married. This finding underscores the crucial role of social support in preventing the negative consequences of urban migration on elderly well-being. The intersection of social isolation among older persons and urban migration in the Punjab and Uttar Pradesh calls for social workers and policymakers to implement interventions with specific strategies to the particular problems of the vulnerable older population. Policymakers can mitigate the adverse effects of urban migration and enhance the life satisfaction of older persons in these regions by promoting community-based interventions that facilitate social interaction and social support among older persons.

2. South India

We attempt here to outline the interface between traditional family networks and modern social support mechanisms in promoting life satisfaction among older people in Kerala and Tamil Nadu. In these Indian states with high levels of literacy, healthy health statistics, and modern social support mechanisms, traditional family networks may provide the social space conducive to the well-being of older people. The prevailing norms and customs and the practice of marking many social and family rituals provide the platform for older people to regularly engage in community activities, potentially linked to increased life satisfaction through social connectedness and the perception of engagement in community life. The empirical evidence from various studies lends weight to the contention with the focus on the key role of community-based initiatives in enhancing the physical and mental health and well-being of older people in Kerala and Tamil Nadu. We could reiterate a study by Rasi and Ashifa (2019) validated the positive role played by community-based programs in active aging among older people in Kerala and hence translating into greater levels of life satisfaction, social support,

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and emotional well-being relative to the non-participant group. The finding indicates the importance of community activities in promoting a sense of purpose, belongingness, and social connection among older people. The interface between traditional family networks and modern social support mechanisms in Kerala and Tamil Nadu indicates the possibility of synergetic interaction between formal and informal support mechanisms in enhancing the well-being of older people. In these Indian states, modern social support mechanisms such as community-based initiatives and NGOs complement traditional family networks and provide older people with an extensive network of care and support. Further, the high levels of literacy and favorable health indicators in Kerala and Tamil Nadu reflect the fact that the two have invested heavily in human capital and have consequently developed a solid social infrastructure to promote the welfare of the elderly. The investment in human capital has made it possible to create community-based initiatives addressing the specific needs of the elderly and promoting social interaction, physical fitness, and mental stimulation among them.

3. East India and North East

In the case of the eastern region, we draw here on the Role of community participation and cultural engagement in life satisfaction among aged individuals in Northeast India. The scenario of special traditions practiced by the different ethnic groups and tribes in the region offers scope for elderly individuals to take an active part in cultural events, traditional practices, and local governance, and these give them a sense of control, purpose, and satisfaction. Empirical results from different studies confirm the fact and recognize the positive effect of cultural engagement on the life satisfaction, self-esteem, and social support among aged individuals in Northeast India. Evidences from a cross sectional study in India including the state of West Bengal (Srivastava et al., 2021,) on psychological well being revealed that elders who took part actively in community participation demonstrated better psychological health and overall well being. In the same way, a study carried out by Engheepi et al. (2024) confirmed the positive correlation between quality of life (QOL) among elderly individuals in North East

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India and active involvement in social activities where the research findings further revealed that the sudden boom in the migration of young people to big cities and metro cities have contributed negatively in this area of elderly participation and hence a lower score in the QOL. In Manipur, the traditional *Lai Haraoba* Festival provides an avenue for socialization for all age groups including older people and to engage in various cultural fervours and remain integrated into their community (Devi, 2024). The Northeast Indian cultural setting, with its rich culture of community engagement and social interaction, provides a particular context for understanding the cultural engagement and life satisfaction of older people. In this setting, cultural activities and festivals are a source of social engagement, intergenerational relationships, and community building, which are essential for the well-being and life satisfaction of older people.

4. West India

The western Indian states of Maharashtra and Gujarat have long experienced rapid urbanization due to widespread industrialization in the two states during the last few decades. The sudden transformation in traditional norms and social structures had led to the rise in the numbers of elderly persons who live alone or in the care of others in a phenomenal scale. Even though traditional social practices such as religious processions, religious gatherings and festivities are still in abundance here and have contributed much in providing social support, new dimensions in challenges have emerged among the elderly persons in terms of their mental health and loneliness problems in the states (Kumar et al., 2020). A study conducted through LASI in several states and union territories in India including Maharashtra and Gujarat revealed significant chi-square values in between factors and attributes such as participation in social activities and loneliness (Srivastava & Srivastava, 2023). To reiterate a crucial point, research by Ambati (2015) found that elderly individuals in Gujarat who lived in assisted living facilities were mostly motivated by forced choices such as neglect by their heirs or family conflicts rather than an actual premeditated felt needs-based choice to stay in such centres. The research

also indicated, however, that policymakers must develop regulations and provisions for assisted living facilities so that these facilities can provide elderly individuals with high-quality care and support in the absence of loved ones doing the caregiving tasks as the respondents mostly raised their concern of feeling uncared for by their loved ones even while staying in such facilities.

The Paradoxical Impact of Modernization on the Elderly in India

The multifaceted contentious course of changes brought in by globalization and hyper-urbanization in India have brought about sweeping changes in the lives of India's aging population, and their impact on the well-being of the aged is complex and multidimensional. While modernization carries with it the dangers of disintegration of traditional family support structures and possibilities of isolation, it also carries with it the prospects of social engagement, access to healthcare, and economic empowerment. The widespread cases of transition of family structures from joint to nuclear systems could reinforce certain conditions that pertain to feeling of abandonment and loneliness among older people in India. In 2017-18, as per LASI Wave-1, nearly 27% of elderly people in Rural India either lived alone or with their spouse. The corresponding data for Urban India is nearly 21.6% (higher figures in rural areas should indicate outbound migration of younger members of family from rural to urban areas). This transformation in familial systems and rapid erosion of joint family systems could imply noteworthy inferences for the social support and health of older people. It has been repeatedly reported through studies that social isolation is a robust predictor of poor mental and physical health among older people. To reinforce this idea, a study conducted by Mishra et al. (2023), it was found that socially isolated older people reported lower levels of life satisfaction, psychological well-being, and physical health. There are varying figures on total internet users among elderly persons but generally it could be around 15% of internet users in India that are above the age of 60 years (Srinivasan, 2025). In reiterating this notion, Lei et al. (2024) showed that older individuals who used digital platforms for social interaction reported

higher levels of life satisfaction, social support, and emotional well-being. The COVID-19 pandemic has also promulgated the need for adoption of e-healthcare and telemedicine services in India, allowing older individuals to access healthcare services from their homes. Reportedly in India, the National Telemedicine Service viz. *eSanjeevani* has completed 3 million (30 lakh) consultations by 2021 (Ministry of Health and Family Welfare, Govt. of India, 2021). Research has shown that older individuals who use telemedicine services report higher levels of satisfaction, access to healthcare, and reduced healthcare costs. Choi et al. (2022) confirmed that older individuals who used telemedicine services reported higher levels of satisfaction, access to healthcare, and reduced healthcare costs.

Challenges Facing the Elderly in India

Based on our findings, we could infer on listing down some key challenges with regards to elderly issues in India. These challenges are multidimensional and require a multifaceted solution to address them.

1. Economic Inequality: While ascertaining the QOL and overall well being of elderly persons, it is imperative to highlight the attention on income factors too. Sadly, economic inequality is a large concern for elderly individuals in India, particularly in rural areas. Huge variations were noticed on the basis of gender and region across India. Majority of female elderly persons were not economically independent as only 14% to 17% were found to be economically independent in rural and urban areas respectively while the data for elderly males could be translated into 51% and 56% (Central Statistics Office, Ministry of Statistics & Programme Implementation, Government of India, 2011). The study highlighted the need for policies and programs aimed at decreasing economic inequality and providing financial security to elderly individuals.

2. Accessibility of Health Care: Constraints in access to healthcare services, especially in rural India, could pose an influential obstacle to ensuring the overall quality of health status of the Indian elderly. The health workforce density in India is relatively low with 8.8 doctors and 17.7 nurses available for every 10,000 individuals (Karan et al., 2021). Zaidi et al. (2023), in their

study, revealed that elderly people in rural areas faced considerable difficulties in accessing healthcare services, inadequate transport facilities, long waiting times, and substandard healthcare facilities.

3. *Social Isolation*: Social isolation is becoming a growing issue for the elderly in India with shifting dynamics in the structure of the family. We have already explained how social isolation is linked with lower psychological well-being scores in the elderly (Mishra et al., 2023). The study highlighted the need to develop policies and programs to promote social interaction and community participation in the elderly.

The Role of Government Policies and Pension Schemes

The pension schemes and government programs have the potential to set the tone for a milestone in the development of the welfare of the elderly and life satisfaction in the country. The Indian government launched different schemes for the purpose of delivering the welfare of the elderly with a view to acknowledging the need for financial protection, health care, and social protection among the elderly population. Key programs are the National Policy on Older Persons (NPOP), providing a comprehensive framework for financial protection, health care, and social protection; the Indra Gandhi National Old Age Pension Scheme (IGNOAPS), which is for financial protection; and the National Programme for the Health Care of the Elderly (NPHCE), increasing access to health care. Other schemes are the Atal Pension Yojana (APY), guaranteeing a minimum pension; the Rashtriya Vayoshri Yojana (RVY), which is for aids and assisted-living devices; and the Awareness Generation and Capacity Building Scheme, strengthening the well-being of the elderly. While these are steps in the right direction, there are difficulties in accessing these programs in rural and marginalized areas.

The Role of NGOs and Community Organizations

NGOs and community organizations play a crucial role in promoting the well-being of the elderly and enhancing life satisfaction in India. Health care, social support, and recreational programs are services provided through such organizations, and they are as per the specific

needs of the elderly. Empirical research has demonstrated the positive effect on the life satisfaction, social support, and emotional well-being of the elderly through programs launched by NGOs. Some NGOs and community organizations have launched successful programs promoting the well-being of the elderly in India. For example: The HelpAge India's Elderly Self-Help Groups (ESHGs) program provides financial empowerment and social empowerment to the elderly. The Dignity Foundation's Community-Based Initiatives (CBI) program provides health care, social support, and recreational programs to the elderly. The Nightingales Medical Trust's (NMT) Elderly Care Program provides holistic health care services to the elderly.

Conclusion

This extensive review has highlighted the significance of cultural factors in shaping the life satisfaction and experiences of older Indians and the dynamic interplay between traditional values, modernization, and aging processes. As India struggles with the issues of a fast aging population, priority must be assigned to the development of culturally relevant policies and interventions designed to promote happy aging. This must invariably incorporate acknowledging the cultural elements that affect the situations and recognising the cultural aspects influencing the circumstances surrounding aging in order to create policies and programs that would be able to address the issues and concerns of the elderly in India. This involves policymakers developing and implementing policies addressing older persons' social, economic, and healthcare needs. Priorities should be on inculcating cultural sensitivity and community-based solutions. This must also translate to healthcare professionals developing and implementing healthcare services attuned to traditional healing practices and tailored to India's elderly population's cultural and linguistic diversity, and researchers conducting further research on Indian cultural attitudes toward aging, with a priority on the development of culturally responsive interventions and policies. In accepting the cultural richness of India's

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