

## PERSPECTIVE

# Home Care Nursing for Elderly in India: Addressing the Needs and Challenges of a Rapidly Aging Society

Nitin Kumar Joshi<sup>1</sup>, Anil Purohit<sup>1</sup>

Global Health Expert, JSPH

### CORRESPONDING AUTHOR

Dr Nitin Kumar Joshi, Global Health Expert, JSPH, 2<sup>nd</sup> Polo Ground Paota, Jodhpur, Rajasthan - 342006

Email: [drjoshinitin30@gmail.com](mailto:drjoshinitin30@gmail.com)

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### ABSTRACT

India is experiencing demographic changes, with the aged population projected to rise from 153 million to 347 million by 2050. This unprecedented phase calls for urgent attention to geriatric home care, especially with the growing prevalence of chronic diseases and dependence on untrained informal caregivers. A trained workforce with expertise in psychological support, preventive and rehabilitative care, digital literacy, and communication is urgently needed. From a demand perspective, systemic constraints inhibit quality care, including limited training, inadequate financial support, social stigma, and caregiver burnout. Frameworks like NITI Aayog's Senior Care Reforms and WHO's Integrated Care for Older People (ICOPE) offer pragmatic strategies focusing on holistic person-centred care, digital enablement, and caregiver support. This piece identifies critical gaps in competencies and advocates for a professional geriatric home care curriculum aligned with national and global priorities. Integrating these measures with supportive policies, financial incentives, and infrastructure will improve accessibility and caregiver retention. Strengthening the geriatric care platform requires collaboration among policymakers, providers, and educators to ensure equitable, compassionate care for India's aging population while empowering caregivers to deliver sustained support.

### KEYWORDS

Aging, Caregivers, Caregiver Burden, Home Care Services, Delivery of Health Care

### INTRODUCTION

India, the world's most populous country, is undergoing a dramatic demographic transition. In the past 50 years, the elderly population has almost tripled (NPHCE, 2011).(1) While India has the largest number of young people globally, aging is advancing rapidly, marking a societal transformation of great magnitude. The elderly population of 153

million (aged 60 and above) is expected to rise to 347 million by 2050, surpassing the number of children below 14 years (UNFPA, 2023; UNDESA, 2008).(2,3)

This shift will bring a sharp rise in demand for specialized geriatric care, driven by chronic diseases such as diabetes, CKD, hypertension, arthritis, and dementia.(4) At present, much of this care is delivered by paid or unpaid informal

caregivers, often without adequate training or resources to manage complex needs.(5) Reliance on informal care is unsustainable in the face of rapid aging. To prepare, it is essential to build a workforce of specialized geriatric caregivers with competencies to address the physical, psychological, and social challenges of aging, this article was drafted with the following aims and objectives to highlight the needs and challenges in home-based elderly care, calling for immediate multi-stakeholder interventions to ensure effective service delivery and equitable care.

**Aim:** To highlight the urgent need for developing specialized geriatric care in India amidst a rapidly aging population.

**Objectives:**

1. To examine the growing burden of chronic diseases and the limitations of informal caregiving in meeting elderly care needs.
2. To identify key challenges in home-based elderly care and the need for multi-stakeholder interventions for effective service delivery.

#### COMPETENCIES FOR GERIATRIC HOME CARE

The growing demand for home care for elderly has opened new market dynamics for professional and non-professional service delivery. However, there remains a gap in competencies perceived as essential by the service seekers. Insights from families seeking elderly care reveal a growing demand for caregivers equipped with specialized skills to cater to their unique needs, such as psychological support, preventive and rehabilitative skills, digital literacy and communication skills. This demands for a curriculum integrated with perceived needs for training and specialisation of caregivers aspiring to work in the elderly home caregiving space.

**Psychological Support:** The elderly often face issues such as loneliness, anxiety, and depression, exacerbated by limited mobility and reduced social interaction (Dumka et al., 2022).(6) Caregivers must be trained to provide emotional support and manage these conditions effectively, ensuring the psychological well-being of their patients.

#### Preventive and Rehabilitative Skills:

Increasing chronic illnesses like diabetes, hypertension, and arthritis are prevalent among the elderly. Recent medical advancement have led to life saving treatment modalities, but with a growing prevalence of co-morbidities like CKD, musculoskeletal, neurological and mental health disorders (Vaishnav et al., 2022).(7) Caregivers must be adept at handling preventive care, managing comorbidities, and assisting with rehabilitation post-hospitalization to improve functional independence.

**Digital Literacy:** With the growing reliance on technology for connecting with family as well as access to digital health platforms, caregivers need to help elderly patients navigate technology from basic psychological connection with family members living away, as well as to access healthcare services efficiently (Niti Aayog, 2023).(8) Training programs must include modules on digital literacy and the use of health technologies.

**Communication and Coordination:** For an effective care the caregivers must be trained and skilled in coordination with healthcare providers, including doctors, physiotherapists, and mental health professionals and understand medical instructions to assist the elderly in following them.(9) Caregivers must possess communication skills to act as a bridge between patients and healthcare teams.

#### CHALLENGES FACED BY NURSING CAREGIVERS

Despite the increasing demand for geriatric home care services, caregivers face several systemic barriers that hinder the provision of quality care, including limited training opportunities, and financial support.

**Limited Training Opportunities:** There is a dearth of comprehensive training programs focusing on geriatric care in India. Most caregivers lack specialized knowledge of age-related conditions and interventions, leading to suboptimal care (Care for Older Adults in India, 2022).(10)

**Inadequate Financial Support:** Low wages and poor job security are prevalent in this sector, particularly in rural areas. Many caregivers struggle to access resources needed for

effective service delivery (Dumka et al., 2022).(6)

**Social Stigma:** Professional caregiving is often undervalued and perceived as low-status work, discouraging skilled individuals from entering the field (Senior Care Reforms in India, 2023).(8) This stigma impacts the availability of qualified personnel.

**Emotional and Physical Burnout:** Caregivers frequently experience stress and fatigue due to the demanding nature of their work, compounded by inadequate support systems.(9) Addressing caregiver well-being is equally critical in a longer term to sustaining the workforce and ensure equitable health delivery for the elderly.

#### POLICY AND FRAMEWORK RECOMMENDATIONS

The urgent need for skilled workforce in geriatric space and addressing the demands of India's aging population through a comprehensive and inclusive approach has been strategized and highlighted in national government policies as well as by WHO. Two significant frameworks—Niti Aayog's position paper on Senior Care Reforms and the World Health Organization's (WHO) ICOPE framework—offer valuable guidance in this regard.

**Niti Aayog's Senior Care Reforms:** The position paper identifies four pillars—Health, Social, Economic, and Digital—as priority areas for senior care service delivery (Niti Aayog, 2023)(8):

**Health:** Emphasizing preventive and curative services tailored to the elderly's specific needs. This includes mobile health units, home visits, and integrated primary care models.

**Social:** Promoting community engagement and reducing isolation through neighbourhood networks and social support groups.

**Economic:** Developing robust financial assistance programs for the elderly and their caregivers to reduce economic vulnerabilities.

**Digital:** Leveraging technology, such as telemedicine and digital health platforms, to improve accessibility and quality of care. This also includes enhancing digital literacy among caregivers and the elderly.

**World Health Organization's ICOPE Framework:** The ICOPE (Integrated Care for

Older People) framework emphasizes person-centered assessment and care pathways. It focuses on maintaining intrinsic capacity, which includes cognitive function, mobility, vision, hearing, and nutrition (WHO, 2021).(11) Some of the key aspects of the ICOPE Framework include:

**Person-Centered Goals:** Setting tailored health and social care objectives for each individual based on their needs and preferences.

**Screening and Assessment:** Identifying declines in intrinsic capacity across multiple domains and developing personalized care plans to address these issues.

**Caregiver Support:** Providing training and resources to caregivers to enhance their ability to manage age-related conditions effectively. These frameworks align with India's unique needs and can serve as blueprints for strengthening geriatric home care nursing in the country.

#### WAY FORWARD IN THE GERIATRIC HOME CARE SKILLING

The development of a specialized curriculum for geriatric home care skilling is paramount to meeting the growing demands of India's aging population. Training programs must be designed to address the specific competencies required by caregivers, including psychological support, preventive and rehabilitative care, digital literacy, and effective communication. These programs should draw from the Niti Aayog and ICOPE frameworks to ensure alignment with global standards and national priorities. Additionally, the integration of geriatric home care into national healthcare policies is essential, accompanied by adequate funding for infrastructure development and caregiver remuneration. Offering tax incentives and subsidies for families utilizing home care services can further enhance accessibility. Community-based models, such as health centers and mobile units, should also be expanded to improve access in underserved regions. Importantly, caregiver well-being must be prioritized through mental health support, stress management initiatives, and fair compensation to retain skilled personnel in this critical field. These measures will enable the creation of a sustainable and skilled

workforce equipped to provide quality care for the elderly.

## SSCONCLUSION

The challenges and opportunities in geriatric home care nursing demand immediate attention and collaborative action. The establishment of a specialized curriculum and the adoption of frameworks such as Niti Aayog's Senior Care Reforms and WHO's ICOPE guidelines are critical to addressing the unique needs of both caregivers and care recipients. By fostering an ecosystem that supports training, policy integration, and community engagement, India can ensure that its elderly population receives care that is not only accessible but also equitable and compassionate.

Moving forward, strategic investments in training and infrastructure, coupled with innovative policy solutions, will be essential in transforming the geriatric care landscape. A collaborative effort among policymakers, healthcare providers, and educational institutions will ensure that elderly citizens in India age with dignity, health, and independence, while caregivers are empowered to deliver the highest quality of service.

## AUTHORS CONTRIBUTION

NKJ and AP jointly conceived the idea and scope of the review. NKJ conducted the literature search, data extraction, and drafting of the manuscript. AP contributed to the critical review, intellectual content, and refinement of the manuscript. Both authors read and approved the final version of the article.

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There are no conflicts of interest.

## DECLARATION OF GENERATIVE AI AND AI ASSISTED TECHNOLOGIES IN THE WRITING PROCESS

The authors used Chat GPT in order to refine the grammatical flow of the manuscript. After

using this tool/service, the authors reviewed and edited the content as needed and take full responsibility for the content of the publication.

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