### CHAIR & MODERATOR



**MS. RITA MENON, IAS** 

Vice - President, AIWEFA Former Secretary, Govt. of India

### WELCOME ADDRESS



### **MS. ASHA CHANDRA** President, AIWEFA

### **CONTEXTUAL PREFACE**



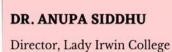
**DR. VEERENDRA MISHRA, IPS** Director, NISD



### **MS. PREETI SUDAN, IAS**

Former Secretary, Ministry of Health & Family Welfare, Govt. of India Member, IPPPR, WHO





Т **DR. SOUMYA HEGDE** S

### **RESOURCE PERSON**



### **DR. MAYANKA GUPTA**

Executive Member, AIWEFA & Asst. Prof., Lady Irwin College

Geriatric Psychiatrist

PARTICIPATION CERTIFICATE FOR ALL

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All India Women's Education Fund Association



### ALL INDIA WOMEN'S EDUCATION FUND **ASSOCIATION (AIWEFA)**

NGO in Special Consultative Status with UN ECOSOC and Observer Status with UNFCCC

with support from

NATIONAL INSTITUTE OF SOCIAL DEFENCE (NISD) (Ministry of Social Justice & Empowerment)

NATIONAL WEBINAR SERIES **COVID-19 Community Connects** A webinar on

# STRENGTHENING THE PRESENT & POST PANDEMIC RESPONSE : HEALTH & NUTRITION FOR ELDERS



6th FEBRUARY 2021 | 5:00 - 6:30 PM **ONLINE PLATFORM : Cisco Webex** 

### TALKING POINTS OF THE WEBINAR:

 Health & Nutrition of elders : some key concerns Strengthening capacities of elder & personal plan

Strengthening mental well being of elders

DELHI JNIVERSITY IMES

MEDIA

PARTNERS



## ALL INDIA WOMEN'S EDUCATION FUND ASSOCIATION (AIWEFA)

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NATIONAL INSTITUTE OF SOCIAL DEFENCE (NISD) (Ministry of Social Justice & Empowerment)



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# **COVID 19 Community Connects:**

(JANUARY -

FEBRUARY 2021)

**MEDIA PARTNERS:** 

N.

OFFICIAL

DELHI UNIVERSITY

INTERGENERATIONAL BONDING: Baby boomers and Generations X, Y and Z

Youngest to the Oldest

2

3

4

5

Reboot to promote Intergenerational Bonding

Health & Nutrition for Elders

Economy and Livelihoods for Elders

WEBSITE : www.aiwefa.org | E-MAIL : aiwefa29@gmail.com in: Aiwefa f: Aiwefa Ngo : Aiwefa

# NATIONAL WEBINAR

# **SERIES**

**COVID 19 Community Connects** 

## **WEBINAR 4**

COVID19: STRENGTHENING THE PAST AND POST PANDEMIC RESPONSE:

# HEALTH AND NUTRITION FOR ELDERS

# DATE: 6<sup>th</sup> FEBURARY, 2021

TIME: 5:00 pm-6:30pm

**SUMMARY REPORT** 







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## Acknowledgement:

This summary report is of **Webinar 4: Covid19: Strengthening the Past and Post Pandemic Response: Health and Nutrition for Elders** which was conducted on 6<sup>th</sup> February 2021, 2021 at 5:00 pm-6:30pm. This was an online webinar organised as a National Seminar Series- COVID by All India Women Education Fund Association (AIWEFA) with support from National Institute of Social Defence (NISD), Ministry of Social Justice and Empowerment. As it was an online platform it was our privilege that many international participants joined the webinar. We had participants not only from different parts of Indian but also from Philippines, Nepal, Morocco, Bangladesh, Thane .The webinar was hosted on the platform Webex Cisco and link with

https://aiwefa.webex.com/aiwefa/ldr.php?RCID=b6d966f762a746efbe0db79e63aecd57. Password: Aiwefa123

The number of participants were 207.

AIWEFA had founded Lady Irwin College in 1932 and AIWEFA is always appreciative of the support which comes from Dr. Anupa Siddhu, Director Lady Irwin College and Lady Irwin College at large.

It is because of the vision and the ever present support of Ms. Asha Chandra, President AIWEFA that this **National Webinar Series COVID 19: Community Connects** in totality and this particular webinar **Covid19: Strengthening the Past and Post Pandemic Response: Health and Nutrition for Elders**: during the difficult COVID19 times was made possible. AIWEFA acknowledges and is grateful to NISD in general and Dr. Veerendra Misra, Director-NISD and Mr. Sridhar Ranga Reddy, Deputy Director, NISD in particular for believing in AIWEFA's potential and the support from them for making this online **National Webinar Series** a possibility.

AIWEFA acknowledges and is grateful to the experts of the webinar panel-Ms. Preeti Sudan, IAS- Former Secretary, Ministry of health & Family Welfare, Govt. of India, IPPPR, WHO; Dr. Anupa Siddhu ,Director Lady Irwin college ;Dr. Soumya Hedge-,Geriatric Psychiatrist The experts also included Ms. Asha Chandra, President AIWEFA, Dr. Mayanka Gupta, Executive Member, AIWEFA.

The contribution to the **National Seminar Series** are also made by Ms. Rita Menon, Vice President AIWEFA, former Secretary, Ms. Sarla Manchanda, Former Vice-President

AIWWFA and Executive Member, Dr Renu Malaviya, Secretary, AIWEFA, Dr. Adarsh Sharma Former Vice-President AIWWFA and Executive Member, Ms. Chitra Sarkar, Jt. Secretary, AIWEFA, Mr. Umesh.C Goyal, Treasurer, AIWEFA, Mr. Sudershan Sharma, Jt. Treasurer, AIWEFA and Dr. Mayanka Gupta, Executive Member, AIWEFA.

Thanks are also due to Mr. Mithun Singh and Ms. Asha Ahuja who worked behind the screen to make the webinar a possibility.

Our Student Interns were a great support which include Ms. Yashika , Ms. Palak Khanna, Ms. Srishti Goel and Ms.Palak Sharma

The summary of the proceeding were prepared by Dr. Renu Malaviya, Secretary AIWEFA with the support of Ms. Sarla Manachanda and the Student Interns (Report Committee): Ms. Mansi Sharma, Ms. Simran Luthra, Ms. Japleen Kaur and Ms.Anmol Arora.

The webinar greatly benefited from the close collaboration and partnership of our partners which included Delhi University Times and University of Delhi, Official.

## **About AIWEFA:**

All India Women's Education Fund Association (AIWEFA) was founded in 1929 under the leadership of Mahatma Gandhi and vibrant women stalwarts of the freedom movement like Sarojini Naidu, Rajkumari Amrit Kaur, Aruna Asaf Ali, Kamaladevi Chattopadhyay and Annie Besant among others for the purpose of empowering women.

Education was recognised as the catalytic agent for social change and in 1932, AIWEFA founded the Home Science College, Lady Irwin College, New Delhi to bring a scientific temper in women's education.

For the last nine decades, AIWEFA's programmes in rural and urban areas have been implemented to promote holistic and sustainable development for welfare of communities. Activities promote education and training of women for family and child care, environmental sustainability, health and nutrition, development of rural families through introduction of drudgery reducing equipment for agricultural management, skill development, women in political representation, and programmes to fight violence against women.

Today AIWEFA campaigns and mobilizes nationally and internationally through its field projects, seminars, workshops conferences, publications and networking to bring about a sustainable approach to human development and advancement of weaker sections of society. Partners include NGOs, Central and State Governments, public sector, corporate and bilateral agencies.

In 1999, AIWEFA was granted the, "NGO in Special Consultative Status with the Economic and Social Council of the United Nations (ECOSOC)". In 2003, AIWEFA accepted the role of Regional Coordinator of the UNs Informal Regional Network of NGOs (NGO IRENE). In 2017 AIWEFA has been conferred the Observer Status with UNFCCC.

In recent years, AIWEFA's programmes include National Conferences on, "Transition of women from education to full employment" and "Ensuring healthy lives and promotion of wellness in old age" and the national level initiative titled, "Khadi goes Global". AIWEFA has also been conducting workshops at college and school level on, "Cyber Security", "Prevention of Drug Abuse" and "Promoting Intergenerational Bonding". Our other recent grassroots initiatives include, "Promotion and development of Handicrafts from locally available resources" in Andaman and Nicobar Islands.

Internationally at the United Nation level, AIWEFA's programmes include, "A World We Women Want" which documented the robust implementation strategies from Asia, Africa and the global South towards achieving the Sustainable Development Goals (SDG). To celebrate Mahatma Gandhi's 150th birth anniversary and AIWEFA's 90th foundation year, "Khadi Goes Global" envisages linkages between local Khadi clusters and International NGOs towards providing additional employment to farm women and achieving the 2030 agenda for development.

NISD in the past had supported AIWEFA by facilitating the conducting of 22 school and college level workshops on, "Promoting intergenerational bonding", over 35 workshops on, "cyber-security awareness workshops", 5 workshops on, "Drug Addiction Prevention Awareness" and so on.

## Introduction:

India is a country which prides itself on valuing the importance of family as a closely-knit and the basic building block of society as also the first line of care and support for its members. However, as at many other parts of the globe, demographic and social changes are affecting family trends in India. Public discourses around COVID-19 that portray it as a disease of older people can often exacerbate negative stereotypes about older persons. Social stigma in the midst of a health outbreak can result in people being labelled, stereotyped, discriminated against, treated differently, and/or experience loss of status because of a perceived link with a disease, which can negatively affect those with the disease, as well as their caregivers, family and communities. Although we all are at risk of getting infected by the virus, however, certain sections of the society such as the elderly, persons with disabilities, or persons with pre-existing medical conditions might suffer from more severe consequences. In order to tackle the pandemic, countries across the globe are promoting containment measures which often imply distancing, ensuring that individuals will stay physically away from one another and reduce the spread of the virus. While, "Physical distancing", is crucial, it leads to disruption in daily activities. Therefore, the policy of physical distancing needs to be accompanied by social support measures and targeted care for older persons and persons with disabilities and by increasing their access to digital technologies which will improve their social networks, access to health services and pensions. As the pandemic brings out more and more mental health issues it also has created an increase in violence against women, children and the elderly. As per recent data released by the National Legal Services Authority (NALSA), the nationwide lockdown has led to a rapid increase in cases of domestic violence. Children already living in violent or dysfunctional family situation are also highly vulnerable to abuse at home during lockdown which can affect their physical and mental health and may affect their personalities in the long run. A survey conducted in 2019 by the Age well Foundation found out that around 70 percent of elderly face abuse and harassment by family members. This number is likely to increase as older persons who are quarantined or locked down with family members or caregivers may face higher risks of violence, abuse and neglect. Older persons, women and children living in precarious conditions – such as refugee camps and informal settlements are particularly at risk, due to overcrowded living conditions, limited access to health services,

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water and sanitation facilities, as well as potential challenges in accessing humanitarian support and assistance.

The lockdown, however, presents opportunities to re-focus and re-orient the policies towards these vulnerable groups. For example, intergenerational bonding can help in improving relations within the family and cater to the social, physical and emotional needs of the elderly. Program activities to connect the old and young have produced desirable outcomes and are an effective tool to bridge the generation gap. Social protection and financial assistance to vulnerable women should also be concentrated upon. Maintaining essential physical and mental health support and social welfare services becomes important for children living in violent households. There is a definite need for communication and engagement between vulnerable groups, government, and civil society in order to identify, formulate, and implement protection policies successfully. Long term planning needs also to be concentrated upon in order to stabilize the economy after COVID-19. Not only financial assistance packages, but a new and strengthened focus on improving the health sector along and nutrition practices should be of importance. Digital Re-skilling of the workforce and investing in e-learning sector wherein an equal distribution of resources should also be looked upon in order to improve literacy rates in the country. There is an urgent need to broaden our partnership with civil society and others in shaping the policies that affect their lives. We also need to tackle ageism and stigma against older persons head-on. Governments need to ensure that older persons, persons with disabilities and women are consulted and encouraged to participate in policy decisions to place supportive measures that guarantee their inclusion. Innovative approaches, backed by evidence and data disaggregated by age, but also sex and relevant socio-economic characteristics, are essential to effective public policy making that is inclusive of these vulnerable groups. COVID-19 thus poses a real challenge for the developing countries as the crisis threatens employment opportunities, physical and mental well-being, health and nutrition and equity in education. An air of uncertainty which looms all around the world is making individuals concerned about their future. In these testing times, it is best to understand the impact of the crisis on government, healthcare, economy, and lifestyle to re-orient ways which are in sync with sustainable development goals 2030 to minimize harm to the individual in the society, and it goes without saying that this is a time when we need to reach out to each other within our families, neighbourhoods and communities. The need to rebuild solidarity and the social fabric becomes all so important especially when a crisis of such a magnitude strikes. To fight the

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virus, greater solidarity and respect for each other are needed from all of us. Among the various social institutions, the family is probably the only institution that is truly age integrated".

The education system both at the school level as well as at the higher education level also always has a greater understanding and insight into the dynamics and connects between the generations of the family and the child or the young adult. The school system in particular and the college and university system in general are well aware of the role that school and family interface or college and family interface can play is the holistic development of the child, adolescent and the young adult. With COVID pandemic the education system rose to the situation and managed to restructure itself towards a vast increase in technology usage trying to keep the momentum of the learning- teaching processes, opening dialogues with family members across the generations ie grandparents, parents, children and at time even the extended family as also other stake holders. Hence the education system has many lessons to share with reference to intergenerational bonding, mental health issues, increased but optimal use of technology for intergeneration bonding and the way forward as the 'New Normal' is well here to stay even after the COVID goes away.

#### Through this webinar series, AIWEFA seeks:

1. To provide a premier interdisciplinary platform for researchers, practitioners and educators to discuss how the intergenerational understanding can be promoted to bridge the generation gap and enhance generational re-engagement in the family, community and the wider society.

2. To showcase the wide spectrum touching the violence across varied age groups and scenario during this global pandemic and deliberate on how the gaps can be fulfilled

3. To focus on pressing issues at the time of this global pandemic, trends, and concerns as well as practical challenges encountered and solutions that families, elders, women, Government, society can adapt and integrate into the cultural and social milieu.

4. To expand the scope of the intergenerational perspective and alert corporations to realize the need to seriously work towards an intergenerational workforce in an aging society.

5. To look at the possibility of creating an Intergenerational Strategy Committee to recognize the inevitability of such invisible disasters and the need to adequately prepare all6. To gain insight into the, 'New Normal' educational processes and their conceptualisation towards intergenerational bonding.

## Programme Schedule and Minute to Minute: WEBINAR 4 COVID: STRENGTHENING THE PAST AND POST PANDEMIC RESPONSE: HEALTH AND NUTRITION FOR ELDERS DATE: 6<sup>th</sup> FEBURARY, 2021 TIME: 5:00 pm-6:30pm

Time	Speaker	Торіс
4:50 pm to 5:00 pm		Virtual assembling
5:00 pm to 5:05 pm	Ms. Rita Menon	Introduction to the webinar and Lamp lighting
5:05 pm to 5:11 pm	Ms. Asha Chandra	Welcome Address
5:11 pm to 5:20 pm	Dr.Veerendra Mishra	Contextual Preface
5:20 pm to 5:35 pm	Ms. Preeti Sudan	Health and Nutrition of Elders: Some Key Concerns
5:35 pm to 5:50 pm	Dr. Anupa Siddhu	Strengthening Capacities of Elders and Personal Plan
5:50 pm to 6:05 pm	Dr. Soumya Hegde	Strengthening Mental Well Being of Elders
6:05 pm to 6:15 pm	Ms. Rita Menon	Way Forward
6:15 pm to 6:25 pm	Dr. Mayanka Gupta	Q & A Session
6:25 pm to 6:30 pm	Ms. Rita Menon	Closing and Webinar 5 poster

## **Proceedings:**

Introduction to the webinar and lamp lighting Ms.Rita Menon, Vice President, AIWEFA, Former Secretary, Government of India

Welcome Address and About AIWEFA- Ms. Asha Chandra, President AIWEFA

Contextual preface: – Dr. Veerendra Mishra, IPS Director NISD

Way forward: Ms.Rita Menon

### About the Conference:

Ms. Rita Menon, Vice-President, AIWEFA. Begin with wishing all the persons on the virtual platform for the webinar, 'Good evening dear friends from India and across the world. Welcome to the All India Women's Fund Association (AIWEFA). AIWEFA presents the National Webinar Series on post COVID19: Community Connects with support from the National Institute of Social Defence (NISD) under the Ministry of Social Justice and Empowerment. The webinar today is fourth in the series covering the very significant topic of COVID-19: Strengthening the Present and Post Pandemic Response: Health and Nutrition for Elders. A topic that has engaged communities, non-government organisations governments and policymakers across the world since the impact of the pandemic post March 2020 and since the declaration by the United Nations in December 2020. The declaration by the United Nations in December 2020 has been the most significant declaration that the following year 2021 would be the **Decade of the Ageing**. The year 2020 saw the elderly battle the loss of mobility during the lockdown and also the limited mobility due to the fear psychosis. This impacted the health and nutritional indicators significantly. The problems were aggravated by a series of natural disaster during the 2020 flood, cyclones, floods in coastal and urban areas, loss of income for the household breadwinner, the unforeseen impact of the loss of home and movement to rehabilitation centres and camps that resulted in hardships for the elderly who by definition are the last in the line for nutritious food and medicine. The problem is compounded by the fact that the elderly have no voice, with most of the elderly in the rural and semi urban settings in particular have to work to make a meal and to justify their existence in the household when there is no universal social security system in India. Most of them are

unskilled, casual domestic workers mostly from the unorganised sectors who may make a daily wage. Erosion of their power to earn increased malnutrition and lack of food, to lack of necessities puts them on the bottom of the social ladder leading to violence abuse and very often several mental health and imbalance issues. This webinar on the post COVID-19: Health and Nutrition for Elders, seeks to place this subject on the centre stage and examine the problem as a cross cutting issue in setting out the key concern with focus on the early warning of health indicators, risk reduction and mitigation, management off elders health, strengthening the mental well-being for elders throughout through interventions and strategize and optimise the opportunities for better health in order to ensure social and economic participation and reduce the impact of fear, malnutrition and social isolation coupled with physical abuse and mental health problems.

Ms. Rita Menon welcomed all the participants and presented the house rules for the webinar on an online platform.

To invoke the grace of the Higher Being and begin the program on the fourth day of the webinar series a video for virtual lamp lighting was presented.

**Ms. Rita Menon** invited all the participants to attend the virtual lamp lighting and a lamp lighting video was played online.

**Ms. Rita Menon** invited the president of AIWEFA Ms. Asha Chandra for the welcome address.

**Ms. Asha Chandra, President, AIWEFA** welcomed all the participants and the distinguished speakers Dr. Veerendra Mishra, Ms. Preeti Sudan, Dr. Anupa Siddhu and Dr. Soumya Hedge. Ms. Asha Chandra gave a brief introduction of AIWEFA and its journey of 92 years. AIWEFA is the trust body and the parent body of Lady Irwin College, University of Delhi. She highlighted that the viceroy at that time was Lord Irwin and his wife Lady Dorothy Irwin who was the first president of AIWEFA. In 1932, AIWEFA established Lady Irwin College to empower women through Education with a scientific temper. The AIWEFA office is on the campus of Lady Irwin College and is located in the cottage of the first Principal/Director of Lady Irwin College Ms. Hannah Sen. AIWEFA is an NGO, it elects the governing body of the college. It conducts programmes for the sustainable development of college and empowerment

of community, women and children. It organises the Annual Nina Sibal Memorial Award and selects every year an organisation working with Disability for the prestigious award. At the United Nations, AIWEFA in 1999 received the consultative status with the Economic and Social Council ECOSOC of the United Nations. In 2003, AIWEFA was appointed the Regional Coordinator to the UN's Informal Regional Network of NGO (NGO IRENE) and in 2017 another feather in the cap of AIWEFA was as UN Framework Convention on Climate Change (UNFCCC) Observer Status. AIWEFA works with the partners which are the Government/ Public Sector, the Corporates, NGOs, private agencies. Ms. Chandra highlighted that AIWEFA sometimes works with all of them and sometimes with each separate entity to complete AIWEFA's programmes. Ms. Asha Chandra also shared that how AIWEFA involves students and others in its various activities. She mentioned that if a student is selected as a volunteer to work in a programme, they are eligible to get a certificate. She also mentioned that they can sharpen their skills as interns in the working environment. Skill Development Programmes are open for the volunteer like working for social media platforms, report writing, designing and administration where the interns can gain practical knowledge and can develop all round personality. Scholastic pathways that AIWEFA work in were shared which include IT and social media campaigns and tool kits, websites and report content writing, designing campaigns posters and other advertising materials, technical resources for webinars. Interns can also work with the Corporals and the Administration Department of AIWEFA. Some Skill Development initiatives have included Training Underprivileged Women to become car drivers. She highlighted that 150 women were trained in self-defence, 5000 students attended Cyber security workshops, prevention of drug abuse and Intergenerational Workshops. AIWEFA also conducts a one-month professional diploma in banking online programme for students. Ms. Chandra stated some of the conferences organised and conducted by AIWEFA over the past five years which included, 'Transition of Women from Education to Employment Sector'. Some UN programmes included, 'The World We Women Want', 'Khadi Goes Global' conducted at the UN headquarters in New York. She also spoke about the past projects which include women security, cyber security. The upcoming UN programme she stated is a Virtual Webinar on, 'The World We Women Want: Gender -Just and Violence Free', which is to take place on 18th of March 2021 with the Permanent Mission of India, New York.

Ms. Rita Menon welcomed Dr. Veerendra Mishra, Director, NISD to present a contextual preface to the webinar.

Ms.Rita Menon welcomed the first esteemed panelist Ms.Preeti Sudan to present her perspective about the current policies that came up during the pandemic to ensure health and nutrition in the elderly.

# Ms. Preeti Sudan, Former Secretary Ministry of Health and Family Welfare, Govt. of India, Member IPPPR, WHO.

Ms. Preeti Sudan thanked everyone for inviting her on this occasion of AIWEFA. Her topic on which Ms. Sudan would deliberate was health and nutrition. She highlighted that when we all look at the scenario and see that within a year we got a vaccine and that is a very big achievement for all of us in India and in the world. The life expectancy is increasing but the rate of new-born babies is decreasing so the number of elderly people in the world is increasing day by day and if we see today's scenario, Japan has 28% elderly people who are above the age of 60 years and Italy has 23% of its population above 60 years. However in India it is estimated that in 2020 the population of elderly is still 10% and by 2050 we will be at 19% rate. She highlighted that this means that the environment or the ecosystem has to have all the things which are needed by the elderly people in the future. Ms. Sudan informed about the challenges faced by the elderly and that these can be categorisation into four categories namely physical, physiological, social and economic. Ms. Sudan stated that there is a recent study for the elderly by the Ministry of Health and Family Welfare. This study is further being extended to people who are above 45 years along with their spouses and they are looking at all the challenges faced by the ageing population of India. The present study conducted highlights that 75% of the elderly are facing chronic diseases, 40% are facing any type of disability, 20% of the elderly are facing Mental Health issues. Apart from that they face other syndromes. It was also found that the elderly face reluctance to eat and the latest studies have found that malnutrition in the elderly is at a very high level. Most of the elderly were found to be undernourished rather than obese and it was found that very few were well nourished. It was found in the study that many of the elderly tend to be having weight loss, muscle loss, low energy, thus leading to increased risk of hospitalization, fractures and infections. This also leads to the elderly having reduced independence, reduced mobility and all these are in a vicious circle. Hence it is important to reflect upon what the society and government can do to improve these situations. Some of the things that the elderly need to get as per the experts are warm cooked and freshly cooked, nutritious food with high protein content, which is tasty and smell nice with visual presentation and with their all family or friends. Meals need to be frequent meals with high fibre diet and adequate fluid intake. It is also important for the elderly to visit the doctor after every 6 months. Oral hygiene is also very important as it affects health. It is very important to engage them in some of physical activities according to their age which may include simple but effective activities such as laugh out loud, sunbath and many more. The Ministry of Health came up with the national programme which includes health care of elderly and it's implementation. It is important if the health care centres are near the residence of the elderly and it prompts people to visit the hospital. It is important to have NCB screening which is needed for many problems. Accessibility of these services is also important. The strengthening of these services are important in both urban and rural areas. Small things should also be looked at in these institutes. India is great as we all respect our elderly and as we had seen in the COVID time. Multi dimensional approach is required which would include the family government, society and other stakeholders.

Ms.Rita Menon welcomed the next panelist Dr Anupa Siddhu to present her perspective.

#### Dr Anupa Siddhu, Director, Lady Irwin College

Dr. Anupa Siddhu first thanked AIWEFA for inviting her to this webinar. She said that during her research she focussed on the elderly as it was a neglected group. At the time when she was doing her doctoral work she stated that except the census nothing much was available in terms of data. She feels that in such a heterogeneous country like India we need to look upon the needs, understanding and personal plan of the elderly from different perspectives. She further appreciated the words of Dr Preeti Sudan on the dietary and nutritional guidelines for the elderly. Talking further about the elderly population growth, Dr Siddhu talked about the role of medical advances as well in this growth. She highlighted the need of strengthening the need of care, wellbeing and health of elderly but the issue of implementation and planning is still a limitation in India. The usual issues at this age ( of the elderly) are falls, frailty, dementia, multi-morbidity and loneliness. Apart from all the remedies, what mainly works is the change in the social structure. She further explained the meaning of active ageing. They must get access to seamless care and rehabilitation. There should be orientation of trained staff for the elderly in both rural and urban areas and for this strategic monitoring is required in all the States with regular update of technology and data. Dr. Siddhu focused on a Positive Enabling System including real time updates and calls to monitor the systems. There was further emphasis on

the WHO Guidelines in Integrated Care for Older People which involves healthy ageing and functional ability. Further she talked about Capacity building on Personal Nutrition and Health like health seeking behaviour, nutrition, physical activity and barrier free home décor. She feels that these values are very important and must be possessed. She said that people at 90 also take up swimming and that helps in shedding their arthritis. She added that talking to children, having a travelling spree, sitting and chatting with family, can really help in leading a joyful life, so such a strategic plan should be there, while shedding all the negativities from the life whether it is personal or professional life. There should be minimum eating out and maximum going out. She summed up by saying that *Atmanirbhar Bharat* is also for the elderly and they should definitely try to shed the dependency if they can.

Ms.Rita Menon welcomed the next panelist **Dr. Soumya Hedge** to present her perspective.

#### Dr. Soumya Hedge, Geriatric Psychiatrist

**Dr. Soumya Hedge** started the presentation by sharing that she has been quite actively involved in managing patients with dementia in residential care facilities so a lot of her experience comes from managing elders with real challenges with their mental illness. She started the presentation by defining age differently by giving a contrast of psychological age as the person's idea of the self as opposed to the chronological age which counts the age in numbers. She also discussed some challenges that the elders face especially in India due to the fragmentation of the joint family system and moving into nuclear families which includes the challenges like loneliness, depression, physical and emotional abuse, financial crisis etc. Dr. Hedge focused on the mental illnesses in the elderly and the most common illness in elderly which is depression. She highlighted that Depression is the elephant in the room and most of the time Depression remained unidentified and undiagnosed so she focused on creating awareness about the symptoms of depression so that any elderly with Depression can be treated. For this she highlighted some common features of depression like low mood or sadness that has sustained for a period of at least two weeks, decreased interest in activities that they enjoyed previously, sleep disturbances, feeling that they are a burden on the family, feeling fatigued all the time, problems with concentration and feeling that life isn't worth living which makes the elderly to end up killing themselves by suicides. Dr. Saumya also mentioned that depression can coexist with a lot of physical illnesses like not being able to walk without a stick, or feeling of being dependent on others. She also discussed how the depression in elderly is different from the younger population where it is found that the elderly

do not usually talk about it as there are no people who ask them about it. So there is a need of assistance on our part to check and avoid the assumption that it is okay to be in such a manner during old age. She also mentioned that they are also preoccupied with somatic symptoms like back ache, headache, burning sensations all these medical factors go to the roots of depression and there is a lot of anxiety and agitation as elderly people are depressed. She also highlighted that the medical conditions like high Blood pressure, diabetes gather so much of our attention that we neglect the symptoms of depression in elderly and think that these are natural in elderly and these assumptions need to be avoided on our part. Dr. Saumya also mentioned some of the treatment for depression in elderly which includes Counselling and therapy which might take longer for the elderly people to respond to but they respond to such treatments while the relapse rate are comparatively less as compared to the younger population. She further added that medications and ECT also works very well for the elderly population. She also talked about the Anxiety disorders in elderly and some of the possible symptoms that people have been facing during the COVID pandemic. Anxiety inhibits the performance and stops people from being active in their day to day lives and this affects their daily routines when it becomes a psychological problem which needs to be addressed. 10% to 11% elderly in the community are facing mental illnesses during the pandemic due to the fear of getting infection. And the anxiety is usually exhibited in the form of sleeplessness, restlessness, difficulties in sleeping, not eating and heart palpitation as well as panic attacks that are associated with anxiety which are usually visible to the outsiders as well. She also mentioned that some of the early interventions of anxiety are to structure their day based on the task that they have to do in a day which will make them feel that they have a purpose of life. Activites such as exercises, art works etc are helpful in facilitating the elderly to focus and reduce their anxiety. Along with all these activities regular appointments with the doctor is very necessary. She also highlighted that during the pandemic there was a huge increase in the number of mental illness cases but she also mentioned that since most of the things are being done online and most of the elderly people had a mobile phone WhatsApp group can be formed so that they could connect with each other and with them. She also highlighted some of the reason which led to the increase in the mental illness cases during the pandemic which includes that they were predisposed to the virus, they were socially isolated, they did not have the access to most of the medical and healthcare facilities which they had previously before the lockdown as well as the constant stream News in What Sapp messages with showed that the elderly are more susceptible to the virus. Dr. Hedge also highlighted that most of the researches done during the pandemic have shown that the elderly were less negatively affected than the younger population which is also

because of the healthy lifestyle that our seniors have had due to which they have shown high resilience to the virus. She also mentioned that the role of wisdom by saying that the seniors have much more experiences of critical situation like wars and natural calamities than the younger population which makes them more wise in making choices and their learning is also more to deal with such pandemics to which the founder generation is exposed for the first time. At last Dr. Hedge concluded by sharing some of the ideas and practises that can be done in order to avoid the mental illnesses which include physical activities that need to diversify the activities provide some activity to our brains , cognitive activities, learning a new language, hobby, getting enough sleep, eating at least one meal with the family. She also mentioned that there is a 49% risk reduction in mental illness when people engage socially even if they are virtually connected to their families and friends.

#### Ms.Rita Menon presented the way forward

Dr Menon started by appreciating the session as a valuable one. The speakers took up many important issues like malnutrition and health among the elderly. A number of prescriptions, dietary habits, state of mind, capacities, hobbies, eating well etc have been covered in this session by the speakers Ms. Menon stated. She also mentioned about the Formal National Program for the elderly and convergence with National Health Mission. Ms. Menon highlighted that at National level there will also be services in larger districts and larger cities but with proper implementation. She further said that if we do achieve this implementation it would be beneficial to the elderly. She said that speakers also spoke of active ageing failing which the dependency ratio would go up. She also talked of the issue of mental health during the pandemic, psychological age and the challenges that elderly come across.

### Dr. Mayanka Gupta presented the pre webinar survey

Dr. Gupta highlighted the information that 61.8% participants felt that in the post pandemic world the elderly and the frontline workers could be going through and suffering from more issues including health and nutrition. It also included a question about the factors impacting the mental health of elderly post COVID to which 75% people felt that social isolation is the reason and 64.8% felt that it was their lack of physical activity and 16.8% felt that increased violence has impacted the mental health of elderly. The next question was, "What could be the issues that the elderly have encountered in the post COVID world based on their health and nutrition?" which included the responses where majority of people said that it is the mental health issues of being socially excluded which include the factors like fear some of them also

felt that food will be more costly and there will be reduced nutritional intake. The survey also highlighted that there will also be allergic reactions of the vaccine and there will be low vitamin D levels in the elderly as they need extra nutrients to enhance their immunities. The next question was "What other ways that the participants can suggest to encourage the practises in the elderly from the post COVID world out?" in which most of the participants felt that proper diet, regular exercise, yoga, regular visit of volunteers to look after them, physical and nutritional needs met, and the mobility with the system to follow the government guidelines and ensure healthy practises, policies and initiatives need to be formulated.

#### Question Answer Session taken forward by Dr.Mayanka Gupta

There were number of questions that the speakers talked about, further added to the richness of the webinar. As there were many questions from the participants, few were addressed in the webinar and the rest were shared with the panelists to get their valuable responses later on.

The first question was, "How to focus on the physical health of institutionalised and non institutionalised elderly in India ?"

**Ms. Preeti Sudan** replied by saying that it is easier to focus on institutionalised elders if the staff there can see the daily diet plan to ensure that the nutrients are given as per the requirement and there could be variations in the individual requirements. Thought it is easy to ensure uniformity but it is needed to ensure that their care and concern. As far as non institutionalized elderly are concerned the elderly who are living alone, for them it is really a challenge but those who are below poverty line are taken care off by the government. Inclusion and sensitivity should be taken care of.

Another question was, "What could be the best strategies to strengthen public health programmes for the elders?"

**Ms. Preeti Sudan** replied by saying that there are 3 things: policies, strategies and intervention in the challenges faced by elderly. Giving examples of NHFS data and the census data so we got to know where we stand and strategies are based on experience and data. So these are the views that make good strategy

The next question from Ms Shruti was, "Soon enough the vaccine for COVID 19 would be available to the general public beginning from the elderly in the society. What would you say to an older person who is apprehensive about the vaccine and fears it could harm them?"

**Ms. Preeti Sudan** replied by saying that all these vaccines are under emergency use and are not under universal immunisation programme yet that is why the prioritisation has been done. The vaccine in the first place is being given to the frontline officers and is kept under proper supervision. Also, the adverse cases are being reported so the government guidelines need to be followed.

Another question asked was, " What are the key points that we should keep in mind while planning meals for elderly ?"

**Dr Anupa Siddhu** replied by saying that the diet should include plenty of water, fluid, plenty of fruits and vegetables, freshly cooked meals, should be dental soft, less of fat, caffeine, spices, sugar and cereals. Sometimes there can be a need for supplements, which should be seen but on a general basis, a balanced and nutritious meal is a must with variations and modifications. Whatever the food choices, they should agree with them with a balance.

Another question was, " Could you suggest some health & diet plan tips and precautions for the elderly people who live in a village with limited resources in the current times?"

**Dr. Anupa Siddhu** shared that the nutritional status of the rural elderly people was great as they consumed healthy food items like fresh and their health and nutritional status was better. They are nowhere less than the people living in urban areas. She mentioned that she has a great hope from elderly people in rural India provided that they maintain the robustness and they are very strong collectively. So from the world over it is known that countryside people altogether are very strong and have good spirits and health while certain people lose their mental health not because of their age but due to barriers that they create. At last, we all need to open our mind-sets and look for the opportunities available.

The next question was, "Will there be a need to modify the Nutrition requirements of the elderly after the pandemic ?"

**Dr. AnupaSiddhu** shared that in September ICMR and National Institute of nutrition has bought out new Nutritional Requirement but there is not much change required in the nutritional intake as the human body remains same but as certain utilizations change and the physical chemical properties of diet change. So, by having a well cooked, easily digestible diet one does not have to eat anything extra or less. By meeting certain vitamins requirements that increase and certain lifestyle changes one can ensure very good health. So all we need is a balanced diet with all vitamins, calcium. We can maintain good nutrition as with age the requirements do not usually change. And in case of any disease the ICMR book doesn't provide any guidelines and that is for a non-diseased person and for any other therapeutic recommended changes should be made under medical prescriptions only.

**Ms. Rita Menon** shared that we have come to the end of our fourth webinar in the series. She expressed that we are truly grateful to all our Panelists and guests, who have joined us from different continents of the world today. Ms. Meno acknowledged the resource persons of this webinar and executive members of AIWEFA, Dr. Sarla Manchanda, Dr. Adarsh Sharma, Dr. Malaviya, Ms. Sarkar, Mr. Goyal, Mr. Sharma and Dr. Gupta. She extended the gratitude to Ms. Asha Ahuja, Administrative staff at AIWEFA.

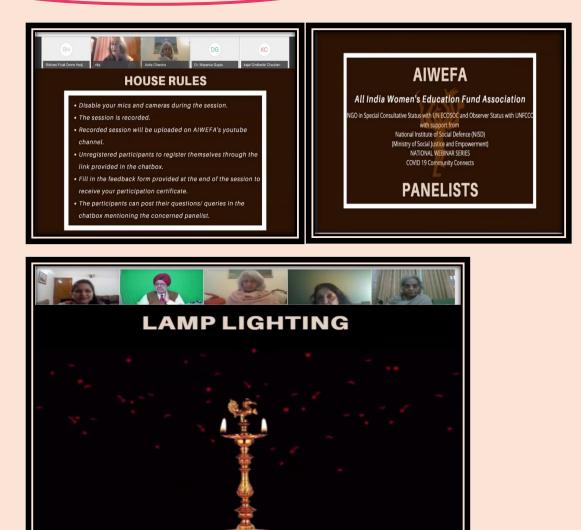
She also thanked all the interns.

She requested the participants to fill in the Feedback form and shared the details of the two other upcoming webinars in the National Webinar Series. She thanked everyone for joining the webinar.



# WEBINAR 1 - PHOTO GALLERY

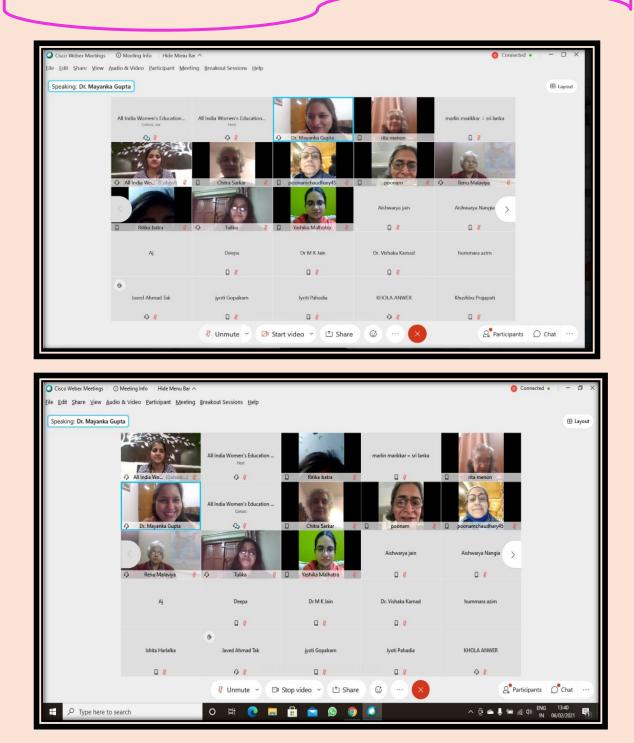
# (6<sup>th</sup> February, 2021)



# WEBINAR 5 - PHOTO GALLERY (6<sup>th</sup> February, 2021)



# WEBINAR 5 - PHOTO GALLERY (6<sup>th</sup> February, 2021)



## Annexure 2:

# WEBINAR 5-

# Profile of the speakers

## PANELLIST



### Dr. Veerendra Mishra, Director, NISD

An IPS in a career spanning over the two decades has been working towards making society sensitive to its surroundings. He is currently heading the National Institute of Social defence, where he has taken up the cause of drug use prevention, the Welfare of senior citizens and transgender and beggary prevention. As the secretary of the central adoption resource authority, he worked towards making the Nation conduive to Child Adoption and promoted Inter-country adoption of children from India. He has made a short film highlighting the plight of the Bedia community, where prostitutions a customarily accepted norms of their families. He has authored a number of books. He has served in 2 United Nations missions and has a pro Bono involvement in another mission. He has represented India in several conferences and workshops including a roundtable by the BRICS Chamber of Commerce and industry 2020, the SAARC regional workshop in Nepal 2019, and a conference by the society of substance use professionals (ISSUP) and UNODC in Vienna, Australia 2019 amongst many others



## Ms. Preeti Sudan

Our first esteemed panelist today is Ms. Preeti Sudan. Ms. Preeti Sudan belongs to the Civil Service in India and has been an IAS Officer of 1983 batch from Andhra Pradesh cadre. She retired as Secretary, Ministry of Health & Family Welfare, Govt. of India, on 31st July, 2020, after nearly three fruitful and successful years, especially the last six months, during which she was at the forefront in tackling the COVID-19 pandemic. She has in the past, successfully handled outbreaks of diseases like Nipah and Zika in different parts of the country. Prior to this posting, she was Secretary, Department of Food & Public Distribution, Ministry of Consumer Affairs, Food& Public Distribution. She also served as Special Secretary, Ministry of Women and Child Development and as Joint Secretary in the Ministry of Defence. Amongst her notable contributions to policy have been initiating and implementing two major flagship programmes of the country i.e. Beti Bachao Beti Padhao and Ayushman Bharat Universal Health Coverage Scheme. She has held esteemed positions in several national and international organizations, most recently being a member of the Independent Panel for Pandemic Preparedness and Response (IPPPR) set up by WHO to evaluate the World's response to Covid-19 pandemic.



# Dr. Anupa Siddhu

Dr. Siddhu is the Director at Lady Irwin College and Head of the Department of Home Science, University of Delhi. She completed her graduation and Post- graduation from Lady Irwin College, University of Delhi. For her Doctoral work from AIIMS, she was awarded the gold medal in 1988. She has been conferred with various awards namely Mahila Shiromani Swaran Padak, Karam Ratna, Shikshak Ratna, Nina Sibal, International Education and Leadership Summit Award and International Award by Women economic Forum. She is an expert member of several research and professional bodies of national and international repute. She is involved in policy making in food safety, nutrition and nutritional security.



### Dr. Soumya Hegde

Dr Hegde is a Geriatric Psychiatrist with nearly two decades of experience working with seniors with mental illness. She has trained in India and UK. Her area of interest and expertise is the management of challenging behaviors in Dementia through a holistic approach which includes medication, supportive psychotherapy, individualized care plans and caregiver training. She has played an active role in several awareness and advocacy campaigns. She has also conducted training programs for students, professionals and family caregivers. She believes that early detection and treatment of mental illnesses can significantly improve one's quality of life.

# Annexure 3:

# WEBINAR SECRETRIAT



## Ms. Asha Chandra(PRESIDENT, AIWEFA)

(AWEFA) An advertising professional, Asha Chandra's expertise spans multimedia platforms. Having worked with the world's leading advertising agencies – J.Walter Thompson (JWT) and Ogilvy & Mather (O & M) – and as a short filmmaker and writer, she brings a target-oriented, all-encompassing approach to the social sector. The President of the 92-year-old All India Women's Education Fund Association (AIWEFA), Ms. Chandra has been the Governing Body Chairperson of the Lady Irwin College, founded in 1932 by AIWEFA. Adapting to the new normal of the coronavirus has become the need of the hour and AIWEFA embarks on this journey with online programming.



## Ms.Rita Menon (VICE-PRESIDENT, AIWEFA)

Rita Menon, Vice President of AIWEFA is an IAS officer of the 1975 batch, had has an extensive career in UP and Govt of India. She has worked in the fields of infrastructure creation, Industrial promotion and development, Defence and Defence Production, Health and Finance. She retired as Secretary Textiles and went on to become CMD Indian Trade Promotion Organisation. She has contributed notably to the development of industrial townships in UP. Industrial corridors, financing of Industry town planning, modernisation of Defence shipyards, upgradation and modernisation of the textile sector, handbook sector and programmes for craftsmen. She has been instrumental in drawing up the blueprint for a state of the art convention and Exhibition complex at Pragati Maidan among other Centre-implemented projects. She participates on professional boards of companies and several not for profit organisations.



### Dr. MAYANKA GUPTA (Executive member, AIWEFA)

Dr. Gupta, Executive member, AIWEFA and Assistance Professor at the Department of Resource Management and Design Application, Lady Irwin College, University of Delhi. Her doctoral degree focused on Gerontology, Quality of life and Inclusive design of Old Age homes. She is an International speaker on Ageing and has conducted several papers in international and national conferences and seminars. She has been the trainer for intergenerational bonding; resume writing, theatre for change and HIV/ AIDS. Presently is the Advisor to Student's Association of her college. She has been a participant of two exchange programmes related to community living and HIV/ AIDS to America and Canada respectively.

## Annexure 4:

# **AIWEFA EXECUTIVE**

### PATRONS

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Dr. Sarala Gopalan

# ELECTED EXECUTVE MEMBERS

Mr. Riaz Umar

Ms. Sarla Manchanda

Dr. Adarsh Sharma

Mr. Himanshu Rai Vaish

Ms. Ishani Chandra

Dr. Mayanka Gupta

### AIWC REPRESENTATIVES

Ms. Sheela Kakre

Ms. Kuljit Kaur

Ms. Rehana Begam

### CO-OPTED EXECUTIVE MEMBERS

Dr. Usha Sharma

### **OFFICE BEARERS**

Ms. Asha Chandra, President

Ms. Rita Menon, Vice-President

Dr. Renu Malaviya, Secretary

Ms. Chitra Sarkar, Jt.Secretary

Mr. Umesh Chand Goyal, Treasurer

Mr. Sudarshan Sharma, Jt. Treasurer

### DIRECTOR, LADY IRWIN COLLEGE

Dr. Anupa Siddhu

# Annexure 5:

# **STUDENTS INTERNS**

**Technical committee** 

Ms.Palak Khanna, Ms. Srishti Goel

## **Report writing committee**

M s. Simran Luthra, Ms. Anmol Arora, Ms. Japleen Kaur, Ms. Mansi Sharma. E-content designing committee

Ms. Palak Sharma

## Social media committee

Ms. Palak Khanna, Ms Srishti Goel

## **Research committee**

Ms. Yashika Malhotra

# Annexure 6:

# Webinar 5 Participants

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