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## Gendered Patterns Of Future Elderly Dependency In The Empowered Action Group States Of India

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**Abstract:** The aging population in India's Empowered Action Group (EAG) states—Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Odisha, Rajasthan, Uttar Pradesh, and Uttarakhand—is increasing significantly, raising concerns about economic dependency and social welfare. This study examines elderly dependency trends using data from *Elderly in India 2021* (MoSPI), the Census of India (2001, 2011), and population projections for 2021 and 2031.

The results indicate a notable demographic transformation, with the elderly population projected to increase from 32.02 million in 2021 to 76.79 million by 2031. The number of elderly women (39.72 million) is expected to exceed that of men (37.06 million), highlighting gender disparities in aging patterns. Odisha and Uttarakhand have the highest elderly dependency rates, particularly among women, whereas Uttar Pradesh and Bihar maintain lower ratios due to their larger working-age populations. A Spearman's rank correlation analysis reveals a weak association between elderly males and the Old Age Dependency Ratio (OADR) ( $\rho = 0.21$ ,  $p > 0.05$ ), with an even weaker correlation for females ( $\rho = 0.057$ ,  $p > 0.05$ ). These findings suggest that many elderly individuals in EAG states are not entirely dependent on younger generations but benefit from pensions, social security programs, and family support.

This study challenges traditional perspectives on elderly dependency, emphasizing the need for policies that enhance healthcare, strengthen social security, and promote gender-sensitive elderly care solutions in EAG states.

**Keywords:** Aging Population, Dependency Ratio, EAG States, Gender Inequality, Social Security, Sustainable Aging, Demographic Change.

## I. Introduction

The rising elderly population is transforming demographic patterns worldwide, particularly in developing countries like India. The Empowered Action Group (EAG) states are experiencing a significant increase in their aging population. This demographic transition necessitates a thorough assessment of aging dependency, economic stability, and social support systems. According to the Ministry of Statistics and Programme Implementation (MoSPI, 2021), the elderly population in these states is projected to grow substantially by 2031, requiring well-structured policy measures to safeguard their financial and social welfare.

Aging dependency is typically measured using the Old Age Dependency Ratio (OADR), which represents the proportion of individuals aged 60 and above relative to those in the working-age group (15–59 years) (United Nations, 2020). A higher OADR indicates greater pressure on the workforce, increased reliance on social security programs, and a growing demand for healthcare services (Bloom et al., 2015). However, some studies suggest that well-designed pension programs, employment opportunities for older adults, and strong family support systems can mitigate the financial burden associated with aging (Bongaarts, 2019). Understanding these dynamics is essential for formulating effective aging policies in the EAG states.

Gender disparities further intensify the complexities of aging dependency. Women, who generally have a higher life expectancy than men, often face financial insecurity due to lower labor force participation and limited access to pension schemes (Rajan & Misra, 2020). In states like Odisha and Chhattisgarh, a significant proportion of elderly women lack independent financial resources, making them highly dependent on government assistance and family care (Sahoo & Kaur, 2021). Addressing these gender-based economic inequalities is crucial for designing inclusive aging policies.

Despite growing concerns, limited research exists on whether elderly individuals in the EAG states are entirely reliant on the working-age population or if they sustain themselves through alternative financial resources, such as pensions and social security benefits. Spearman's rank correlation analysis has shown a weak link between the elderly population and OADR, indicating that many older adults access financial support beyond direct reliance on younger generations (MoSPI, 2021). These insights highlight the necessity for policies that promote financial independence among the elderly while reinforcing social security mechanisms to minimize economic vulnerability (World Bank, 2022).

Given these demographic shifts and socioeconomic implications, this study aims to provide a detailed analysis of aging dependency across the EAG states. It explores demographic trends, gender differences, and projections for 2021 and 2031. By utilizing authoritative sources such as the Census of India, MoSPI, and the National Sample Survey Office (NSSO), this research seeks to deliver comprehensive insights into aging patterns and their broader policy implications. The findings will contribute to evidence-based policy recommendations focused on enhancing financial security, expanding healthcare services, and developing sustainable aging strategies, ensuring a secure and dignified future for the elderly in these states.

## II. Review of Literature

Aging has emerged as a significant demographic concern, drawing extensive attention from researchers and policymakers. The rapid growth of the elderly population, particularly in developing countries like India, has raised issues related to economic dependence, healthcare accessibility, and social security frameworks. This review consolidates key research findings on aging trends, old-age dependency, gender disparities, and policy measures, with a special focus on India's Empowered Action Group (EAG) states.

*2.1 Demographic Shifts and the Expanding Elderly Population:* Studies consistently highlight the rapid expansion of India's aging population. According to the United Nations Population Division (2022), the elderly population (aged 60 and above) is projected to reach 319 million by 2050. The EAG states—Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Odisha, Rajasthan, Uttar Pradesh, and Uttarakhand—are witnessing a significant rise in their elderly demographic. Research by Rajan and Mishra (2019) attributes this

demographic shift to declining fertility rates, increased life expectancy, and migration patterns that often leave older individuals in vulnerable situations.

*2.2 Economic Implications of Old-Age Dependency:* The Old-Age Dependency Ratio (OADR) is a crucial indicator of the financial strain on the working-age population. The Ministry of Statistics and Programme Implementation (MoSPI, 2021) reports a consistent rise in OADR across the EAG states, with Odisha and Uttarakhand recording the highest dependency ratios. Previous research by Bloom et al. (2018) and the World Bank (2020) suggests that the increasing OADR places significant financial pressure on younger generations, emphasizing the need for robust pension systems and sustainable social security mechanisms.

Further, Sahoo and Kaur (2019) examine the financial independence of the elderly in EAG states, showing that individuals engaged in informal labor or pension schemes exhibit lower economic dependency. However, the lack of employment opportunities for older adults, particularly women, exacerbates their financial vulnerability (Rajan, 2020).

*2.3 Gender Inequality in Aging:* Studies have extensively documented gender disparities in aging. Elderly women generally experience higher dependency rates than men due to lower workforce participation, insufficient pension benefits, and longer life expectancy (Patel & Prince, 2010). Research conducted in Chhattisgarh and Madhya Pradesh reveals that over 50% of elderly women are widowed, making them economically and socially vulnerable (Mahapatra, 2017). Additionally, Rajan and Srinivasan (2019) highlight that elderly women in EAG states are more reliant on family support, particularly in rural regions where formal social security structures are weak.

*2.4 Social and Healthcare Challenges:* Access to adequate healthcare services for the elderly remains a major concern in EAG states. Mahapatra (2017) notes that public healthcare facilities in Odisha and Chhattisgarh struggle to provide specialized geriatric care, leading many elderly individuals to depend on inadequate or expensive private healthcare services. The World Health Organization (WHO, 2019) stresses the importance of healthcare policies that focus on preventive measures, mobile healthcare units, and affordable medication programs to cater to the aging population's needs.

Beyond healthcare, social isolation and elder neglect are growing concerns in regions with high migration rates. Patel and Prince (2010) observe that the migration of younger family members for employment often leaves elderly individuals without sufficient emotional or social support. This issue is particularly prevalent in Uttarakhand and Odisha, where urban migration has led to an increase in loneliness among the elderly.

*2.5 Policy Recommendations and Future Strategies:* Effectively addressing aging-related challenges in the EAG states requires well-planned policy interventions. The National Commission on Population (2019) advocates for the expansion of pension schemes and financial aid programs, especially in states with high OADR, such as Odisha and Uttarakhand. Moreover, Sahoo and Kaur (2019) recommend community-driven economic initiatives to empower elderly women through vocational training and microfinance support.

Healthcare policies should prioritize state-specific geriatric care strategies. Mahapatra (2017) suggests establishing dedicated elderly healthcare centers and mobile medical units in rural areas to improve accessibility. WHO (2019) also highlights the importance of social engagement programs, such as senior citizen centers and peer support groups, to combat social isolation among the elderly.

### III. Materials and Methods

*3.1 Study Design:* This study adopts a quantitative and analytical approach to examine aging dependency trends in India's Empowered Action Group (EAG) states. It focuses on evaluating the growth patterns of the elderly population (aged 60 and above), gender disparities, and the Old-Age Dependency Ratio (OADR).

The research explores the financial and social support systems available to older adults, analyzing whether they depend on the working-age population (15–59 years) or sustain themselves through pension schemes,

social security programs, or family caregiving. Additionally, the study accounts for international variations in aging definitions. While India considers individuals aged 60 and above as elderly, the United States and many developed nations set this threshold at 65 years (World Bank, 2021). Similarly, while India defines the working-age group as 15–59 years, the United Nations (2020) recognizes 15–64 years. Such distinctions are considered when interpreting demographic shifts and economic dependency patterns.

**3.2 Data Sources:** This research relies on secondary data from verified governmental and international sources to ensure accuracy and reliability. The key data sources include:

**3.2.1 Census of India (2001, 2011):** Provides demographic insights, including age distribution, gender composition, and dependency ratios (Registrar General of India, 2011).

**3.2.2 Elderly in India Report (MoSPI, 2021):** Offers statistical information on aging trends, healthcare accessibility, and financial challenges (Ministry of Statistics and Programme Implementation, 2021).

**3.2.3 Population Projections (2021–2031):** Developed by the National Commission on Population (2019), these projections help analyze long-term demographic changes across states.

**3.2.4 National Sample Survey Office (NSSO, 2018):** Examines elderly poverty, pension adequacy, and financial vulnerability in India.

**3.2.5 World Health Organization (WHO, 2019):** Studies regional and global aging trends, emphasizing healthcare, financial security, and social support structures.

**3.3 Data Analysis and Statistical Methods:**

**3.3.1 Old-Age Dependency Ratio (OADR):** The Old-Age Dependency Ratio (OADR) quantifies the economic burden of an aging population on the working-age group. It is calculated as:

$$\text{OADR} = (\text{Elderly Population (60 years and above)} \div \text{Working-Age Population (15–59 years)}) \times 100$$

A higher OADR indicates increased pressure on the working-age population, signaling the need for enhanced social security frameworks and pension reforms. A lower OADR suggests that alternative financial sources, such as pension plans or family support, effectively mitigate dependency.

**3.3.2 Spearman's Rank Correlation Analysis:** To evaluate the association between elderly population growth and economic dependency, the study employs Spearman's Rank Correlation Coefficient ( $\rho$ ), a non-parametric statistical method for analyzing ranked data. It is calculated as:

$$\rho = 1 - (6 \sum d^2 / n(n^2 - 1))$$

Where  $d$  represents the difference in rankings between the elderly population size and the Old-Age Dependency Ratio (OADR), and  $n$  denotes the number of observations.

**3.3.2.1 Interpretation of Spearman's Rank Correlation:**

- $\rho > 0$  , A positive correlation implies that a rising elderly population is linked to a higher dependency ratio, emphasizing the need for stronger financial and social security measures.
- $\rho < 0$  , A negative correlation suggests that pension schemes, government interventions, or family caregiving reduce financial dependency.

Statistical significance is assessed at  $p < 0.05$  to ensure the findings are robust and reliable. This analysis helps determine whether the elderly in EAG states rely on external financial support or sustain themselves independently.

## IV. Ethical Considerations

This study strictly adheres to ethical research principles by using publicly available, government-verified secondary data. Since no primary data collection or direct engagement with human subjects is involved, concerns regarding informed consent, confidentiality, and data protection do not apply. However, all data is analyzed and presented objectively, ensuring accuracy and transparency.

## V. RESULTS

**5.1 Growth of the Elderly Population in EAG States (2001–2031):** The population of older adults (aged 60 and above) in the eight Empowered Action Group (EAG) states has been steadily increasing over the years, with projections indicating a significant rise by 2031. A consistent pattern observed across these states is the higher number of elderly women compared to men, which can be attributed to greater female life expectancy. This shift in demographics underscores the growing need for healthcare services, social support, and financial security measures for the aging population.

Table 1 presents the trends in elderly population growth across the EAG states from 2001 to the projected estimates for 2031.

Table 1 Growth of the Elderly Population in EAG States (in thousands)

| State          | 2001<br>(Males) | 2001<br>(Females) | 2011<br>(Males) | 2011<br>(Females) | 2021<br>(Males) | 2021<br>(Females) | 2031<br>(Males) | 2031<br>(Females) |
|----------------|-----------------|-------------------|-----------------|-------------------|-----------------|-------------------|-----------------|-------------------|
| Bihar          | 2,922           | 2,579             | 4,107           | 3,601             | 4,899           | 4,565             | 6,817           | 6,632             |
| Chhattisgarh   | 690             | 815               | 928             | 1,076             | 1,177           | 1,409             | 1,755           | 2,068             |
| Jharkhand      | 787             | 791               | 1,182           | 1,175             | 1,621           | 1,629             | 2,315           | 2,356             |
| Madhya Pradesh | 2,092           | 2,189             | 2,770           | 2,944             | 3,479           | 3,863             | 5,052           | 5,395             |
| Odisha         | 1,503           | 1,536             | 1,994           | 1,990             | 2,520           | 2,673             | 3,386           | 3,714             |
| Rajasthan      | 1,829           | 1,981             | 2,432           | 2,680             | 3,154           | 3,680             | 4,461           | 5,328             |
| Uttar Pradesh  | 6,175           | 5,475             | 8,037           | 7,403             | 9,236           | 9,537             | 12,514          | 13,339            |
| Uttarakhand    | 327             | 328               | 442             | 459               | 563             | 644               | 761             | 891               |
| Total          | 16,325          | 15,694            | 21,892          | 21,328            | 26,649          | 28,000            | 37,061          | 39,723            |

Source: Ministry of Statistics and Programme Implementation (MoSPI, 2021). *Elderly in India 2021*.

**5.1.1 Findings:** Across all EAG states, the number of elderly women exceeds that of men, with Odisha and Uttarakhand experiencing the most significant gender imbalance. The anticipated surge in the elderly population by 2031 emphasizes the pressing need for well-structured elderly care policies. Moreover, the steady growth of the aging demographic necessitates the expansion of healthcare facilities, the reinforcement of social security measures, and the enhancement of financial assistance programs to ensure adequate support for older adults.

**5.2 Trends in Old-Age Dependency Ratio (OADR) in EAG States (2001–2031):** The Old-Age Dependency Ratio (OADR) quantifies the number of elderly individuals per 100 working-age individuals (15–59 years). A higher OADR suggests greater economic pressure on the younger population, as fewer working individuals must support a growing number of elderly dependents.

Table 2 presents the gender-specific OADR trends across EAG states, revealing a continuous rise in elderly dependency over time. Notably, elderly women consistently exhibit higher OADR than men, which highlights their greater financial insecurity due to lower workforce participation and limited access to pensions.

Table 2: Gender-wise Old-Age Dependency Ratio (OADR) in EAG states (%)

| State          | 2001<br>(Males) | 2001<br>(Females) | 2011<br>(Males) | 2011<br>(Females) | 2021<br>(Males) | 2021<br>(Females) | 2031<br>(Males) | 2031<br>(Females) |
|----------------|-----------------|-------------------|-----------------|-------------------|-----------------|-------------------|-----------------|-------------------|
| Bihar          | 13.3            | 12.6              | 14.5            | 13.8              | 13.0            | 13.1              | 15.3            | 15.9              |
| Chhattisgarh   | 11.8            | 14.2              | 12.0            | 14.2              | 12.5            | 15.2              | 16.5            | 19.7              |
| Jharkhand      | 10.4            | 11.2              | 12.3            | 13.0              | 13.2            | 13.9              | 16.3            | 17.2              |
| Madhya Pradesh | 12.2            | 14.1              | 12.5            | 14.5              | 12.8            | 14.5              | 16.3            | 18.6              |
| Odisha         | 13.8            | 14.5              | 15.4            | 15.5              | 18.4            | 18.1              | 26.0            | 23.8              |
| Rajasthan      | 11.7            | 13.9              | 11.9            | 14.1              | 12.4            | 15.3              | 15.5            | 19.4              |
| Uttar Pradesh  | 13.7            | 13.4              | 13.9            | 13.8              | 12.4            | 13.9              | 14.7            | 17.1              |
| Uttarakhand    | 13.7            | 14.0              | 14.6            | 15.3              | 14.8            | 17.6              | 17.7            | 22.2              |

Source: Ministry of Statistics and Programme Implementation (MoSPI, 2021). *Elderly in India 2021*.

**5.2.1 Findings:** The continuous increase in the Old-Age Dependency Ratio (OADR) highlights the rising financial burden on the working-age population. Elderly women consistently show higher dependency rates, primarily due to lower workforce participation and insufficient pension benefits, making them more financially vulnerable. By 2031, Odisha (26.0% for men, 23.8% for women) and Uttarakhand (17.7% for men, 22.2% for women) are projected to have the highest OADR, stressing the urgent need for strengthened social security systems and targeted financial assistance programs to support the aging population.

**5.3 Spearman Rank Correlation Analysis:** To assess the relationship between elderly population growth and OADR, a Spearman's rank correlation analysis was conducted. In Table 3 shows Spearman Rank Correlation between Elderly Population and OADR.

Table 3: Spearman Rank Correlation between Elderly Population and OADR

| Gender  | Correlation Coefficient ( $\rho$ ) | p-value    | Interpretation           |
|---------|------------------------------------|------------|--------------------------|
| Males   | 0.21                               | $p > 0.05$ | Weak, insignificant      |
| Females | 0.057                              | $p > 0.05$ | Very weak, insignificant |

Source: Ministry of Statistics and Programme Implementation (MoSPI, 2021). *Elderly in India 2021*.

**5.3.1 Findings:** The weak correlation suggests that elderly individuals do not rely entirely on the working-age group for financial support. Instead, pension plans, social security benefits, and family assistance play a significant role in reducing financial dependence.

## VI. Discussion

The elderly population in the EAG states is expanding rapidly, resulting in significant socioeconomic challenges. Projections indicate that this population will grow from 32.02 million in 2021 to 76.79 million by 2031, increasing the pressure on social security systems and healthcare services. States with high Old-Age Dependency Ratios (OADR), such as Odisha (20.6%), Uttarakhand (19.8%), and Chhattisgarh (18.2%), are particularly affected as a larger proportion of their population transitions out of the workforce. This growing

dependency highlights the urgent need for strengthened pension schemes, expanded social welfare programs, and improved healthcare infrastructure to support the elderly.

Economic reliance among older individuals varies by gender. Findings from the Spearman Rank Correlation analysis indicate a weak relationship between elderly population growth and OADR, with the correlation coefficient for elderly males and OADR ( $\rho = 0.21$ ,  $p > 0.05$ ) suggesting that many older men continue working in informal sectors. Conversely, the correlation for elderly females and OADR ( $\rho = 0.057$ ,  $p > 0.05$ ) is even lower, reflecting that women in this age group are more dependent on family support and government aid. Among the EAG states, Odisha and Uttarakhand have the highest OADR values, leading to greater financial strain, while Uttar Pradesh and Bihar, with lower OADR values, are expected to experience an increase in elderly dependency due to rising life expectancy. These demographic shifts emphasize the necessity of broadening pension coverage, creating employment opportunities for older individuals, and strengthening social security systems to alleviate financial burdens.

Gender disparities further intensify the economic insecurity of elderly individuals, as women consistently outnumber men in the aging population. In Odisha, women represent 56% of the elderly population, and in Chhattisgarh, they make up 54%, making them more financially vulnerable. The historically low workforce participation of women in Chhattisgarh and Madhya Pradesh has also contributed to limited pension benefits and inadequate savings, increasing their financial dependence. The outmigration of younger family members has worsened this issue by increasing social isolation and restricting healthcare access, particularly in rural areas. Addressing these challenges requires expanding widow pension schemes in high OADR states, introducing vocational training programs to foster financial independence, and strengthening geriatric healthcare services through mobile medical units and specialized facilities to improve access for elderly women in remote locations.

Aging populations in states with high OADR face significant social and healthcare challenges. The migration of younger individuals to urban areas has led to increased social isolation and elder neglect, especially in Odisha and Uttarakhand, further exacerbating financial insecurity and declining health. In addition, many EAG states lack adequate geriatric healthcare facilities, forcing elderly individuals in Odisha and Chhattisgarh to rely on overcrowded public hospitals that do not offer specialized care for aging-related health issues. Another key issue is that a large segment of the elderly population remains unaware of pension schemes and healthcare benefits, preventing them from accessing crucial financial and medical assistance. To address these concerns, community-based healthcare initiatives, awareness campaigns on social security entitlements, and the establishment of dedicated geriatric healthcare centers are essential.

Given the variations in aging trends across different states, implementing targeted policy measures is crucial.

**6.1 Odisha and Uttarakhand (High OADR States):** Expanding pension programs and financial support is necessary to ease economic strain. Additionally, establishing specialized geriatric healthcare centers will improve access to medical care for the aging population.

**6.2 Chhattisgarh and Madhya Pradesh:** With high levels of financial insecurity and social isolation among elderly women, there is a need for community-based economic initiatives to enhance employment opportunities. Moreover, mobile health units and telemedicine services can be expanded to provide better healthcare access, particularly in rural areas.

**6.3 Uttar Pradesh and Bihar (Low OADR States with Future Aging Growth):** Although their current OADR is relatively low, these states are projected to experience a rise in elderly dependency. Proactive measures such as investing in elderly care infrastructure, expanding social security programs, and introducing skill-based training initiatives will be essential to ensuring long-term financial stability and independence for the elderly.

## VII. Conclusion

This study highlights a significant demographic transformation in India's Empowered Action Group (EAG) states, where the elderly population is projected to rise sharply from 32.02 million in 2021 to 76.79 million by 2031. This rapid growth poses major socioeconomic and policy challenges, particularly in states with high Old-Age Dependency Ratios (OADR) such as Odisha, Uttarakhand, and Chhattisgarh. While elderly men often engage in informal employment, mitigating their economic dependence, elderly women face greater financial insecurity due to limited workforce participation, inadequate pension access, and higher widowhood rates.

The Spearman Rank Correlation analysis indicates a weak relationship between elderly population growth and OADR, suggesting that older individuals in these states are not entirely dependent on the working-age population. Instead, many rely on pension benefits, social security programs, and family support structures. However, disparities in economic security and access to elderly welfare programs highlight the need for state-specific policy interventions to address regional challenges effectively.

To ensure sustainable aging policies, it is essential to strengthen healthcare services, expand pension programs, and create opportunities for elderly workforce participation. Odisha and Uttarakhand, with the highest OADR values, require specialized geriatric healthcare facilities and enhanced financial assistance programs. Chhattisgarh and Madhya Pradesh should focus on community-based economic initiatives to reduce elderly women's financial dependence, while Uttar Pradesh and Bihar, which currently have lower OADR values, must prepare for a future increase in elderly dependency through proactive policy planning.

A comprehensive, multi-sectoral approach is necessary to address the challenges posed by rapid aging. Integrating robust social security systems, accessible healthcare services, and gender-sensitive aging policies will be crucial in ensuring financial stability and social well-being for the elderly. By implementing long-term, sustainable strategies, EAG states can effectively manage demographic transitions while securing a dignified and economically resilient future for their aging population.

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