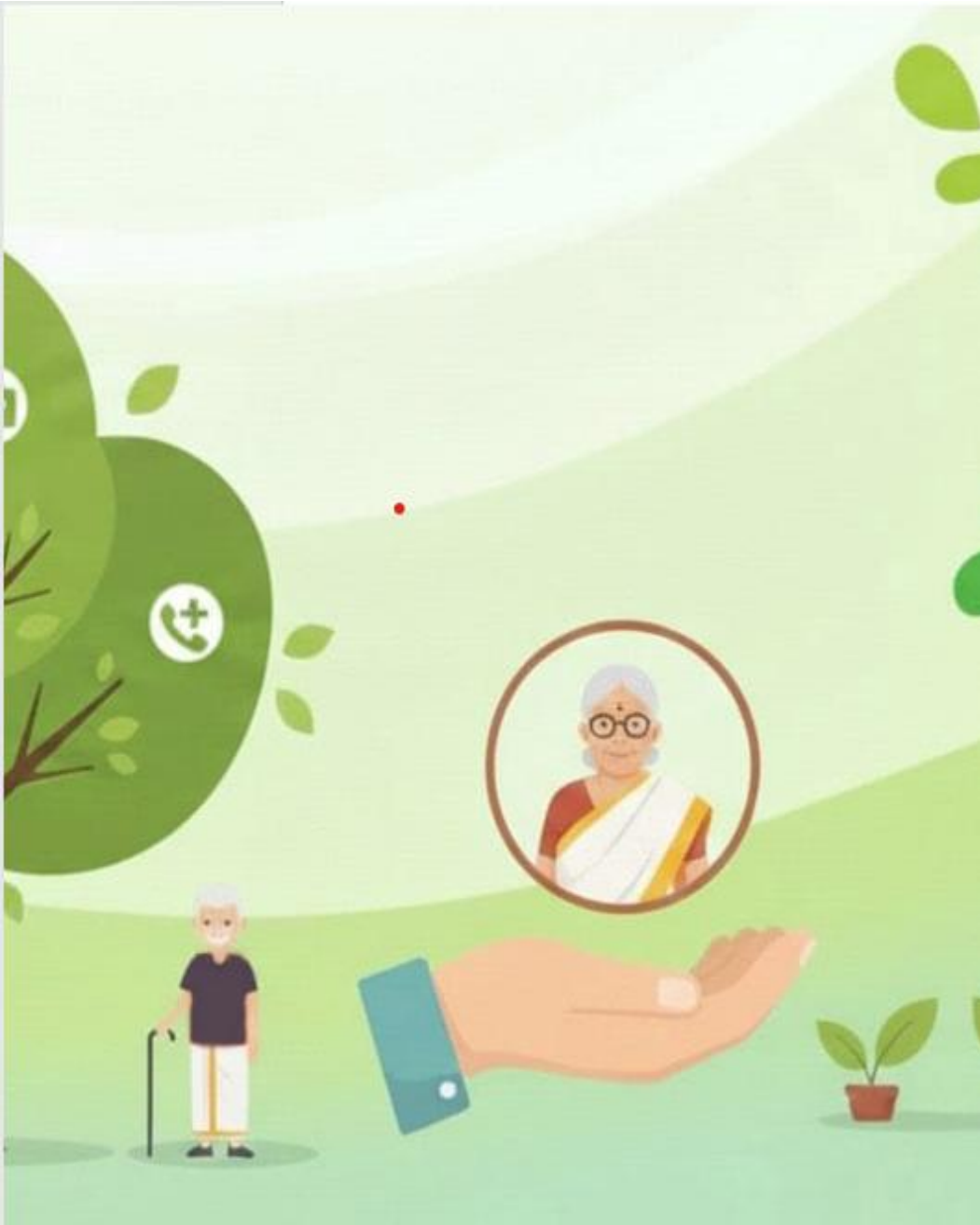


**Vision 2031: International Conference on Development and Democracy : Feb 15-17, 2026**  
**Empowering the Elderly**

# **From longevity to Care Justice: Kerala's Next Frontier**

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# Kerala's Health and Demographic Paradox

## Kerala's Success: Extended Life Expectancy

- Highest life expectancy in India (75-76 years by 2031, women exceeding 80 years).
- testament to successful public health interventions, social development, education, nutrition, and social reforms.
- Longevity is a collective social achievement.

## By 2031: One in Five Will Be Elderly

- One in five persons will be elderly
- Feminisation of ageing: more elderly women, often widowed
- Family sizes shrink; younger generations migrate abroad
- Growing single and elderly-only households

## The Health Paradox: High Morbidity Despite Longevity

- High morbidity rates from lifestyle diseases (diabetes, hypertension)
- Chronic illnesses, dementia, disability increasing
- Growing care needs (ADL, IADL limitations)
- Care demand will intensify

## The Next Phase: Extended life with dignity, autonomy and support

- Urgent institutional demands for structural and governance adaptations.
- Opportunity to plan and prepare, or this achievement could evolve into a social crisis.

# Six Core Design Principles

A transformative care economy requires a coherent architectural framework grounded in Design Justice:



# Japan, Nagayama Care Model: Design Principles in Action



## Equitable

**Services must be accessible within a 30-minute travel radius. all older persons 65+, regardless of income**



## Inclusive & Adaptable

**municipalities have the autonomy to design systems based on their unique demographics and resources**



## Quality

**Minimum team of public health nurses, social workers, and care managers per CGSC**

**Provides preventive care - group exercises and social participation to reduce disability onset.**



## Sustainability

**Statutory and institutionalized through an Act,**



## Accountability

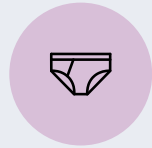
**Local governance institutions and residents are actively involved in governance and co-creation - schools, resident associations, and businesses**



## Gender-Transformative

**Redistributed care from traditional family caregivers to a network of state, private sector, and local community**

# Vision 2031: Making Kerala a Care State



## Institutionalise Care as Public Infrastructure

Care must move from schemes to **legal entitlement**

Kerala Elderly Commission - **lost opportunity**- reinforces family obligation through punitive provisions

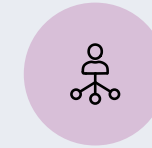
**Shift:** Guaranteeing community-based long-term care as a public right.



## From Silos to Convergence

Fragmented system across Health, Social Justice, and LSGIs needs **convergence.**

**Shift:** Mandate convergence across departments. Pool unutilised funds. Repurpose infrastructure. Scale without fiscal overstretch.



## Decentralised Governance as Core Strength

Leveraging Kerala's LSGIs as an institutional advantage

Panchayats can map elders, tailor services, and monitor quality.

**Shift:** The goal is for every Panchayat to become a neighbourhood care hub.

# Vision 2031: Making Kerala a Care State (continued)



## Strategic Public–Private Partnerships

Fiscal constraints to meet demographic demand. Nagayama demonstrates **regulated private integration within public governance**.

**Shift:** Partner with social impact enterprises, anchoring regulation, price oversight, and quality control in the state.



## Professionalise the Care Workforce

Care work remains *stigmatised and informal*.

Professionalisation ensures dignity, quality, aspirational work

**Shift:** State-certified geriatric training pathways, wage floors & labour protections, migrant worker safeguards, occupational health standards, and worker & agency registration.



## Address Gender Norms

Women bear the invisible burden of unpaid eldercare. Key interventions include respite care as a core service, recognising caregivers' "pain", men's engagement, time-use informed planning, and flexible service design.

Thank you