"EXPLORING ACCESS: ANALYSING AWARENESS AND UTILIZATION OF GOVERNMENT WELFARE SCHEMES AMONG SENIOR CITIZENS IN THE KONKAN REGION"

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Abstract

This research paper explores the awareness and utilization of government welfare schemes among senior citizens in the Konkan division of India. Utilizing data collected from 750 participants across seven districts, the study dissects the levels of awareness and the extent of utilization of these schemes, shedding light on the gaps that need addressing to enhance the well-being of the elderly population. **Introduction** Government welfare schemes play a vital role in ensuring the health and well-being of senior citizens. Yet, the effectiveness of these programs largely depends on how well they are known and utilized by the community they aim to serve. This analysis seeks to investigate the levels of awareness and utilization among senior citizens in the Konkan division, providing a basis for potential improvements in outreach and education. **Methodology** The study surveyed 750 senior citizens across seven districts in the Konkan division. The data collection involved a structured questionnaire focusing on the respondents' awareness and utilization of various government welfare schemes. The collected data were analysed using SPSS 24.0, with results presented in tables and graphs for clear understanding. The findings reveal that the majority of senior citizens possess moderate awareness of government health schemes, with 491 out of 750 (65.47%) categorizing their awareness as moderate. Only 15.07% reported having good awareness, while 19.47% demonstrated poor awareness This suggests that there is significant room for educational initiatives to enhance understanding of available schemes.

- **District-wise Awareness Distribution:** Analysing awareness levels by district clearly indicates disparities: **Palghar:** 29.2% of residents reported good awareness. **Thane:** 27.4% showed good awareness. **Sindhudurg:** Only 2.7% reported good awareness, highlighting critical gaps in knowledge.

- **Mumbai Suburban:** A staggering 67.8% of seniors were categorized as having poor awareness, indicating a pressing need for targeted interventions. **Utilization of Government Welfare Schemes**

- **Utilization Rates:** The study articulates that utilization rates of government welfare schemes vary significantly. For instance, while 68.8% of seniors utilized free OPD care services at government hospitals, other services, such as free physiotherapy, exhibited

alarmingly low utilization rates of 0% **Scheme-specific Utilization Insights:** The analysis shows a stark contrast in usage. **Free supportive devices:** 87.6% of senior citizens utilized these resources, indicating high engagement where awareness is present. Conversely, less publicized services, such as separate queues for elderly persons in hospitals, had only 5.2% utilization, suggesting awareness alone does not drive utilization when information is not effectively communicated. **Conclusion** The analysis of awareness and utilization of government welfare schemes among senior citizens in the Konkan division reveals that while there is some degree of awareness, it is predominantly moderate and varies drastically across districts. Moreover, utilization rates often do not correspond proportionally with awareness levels, highlighting additional barriers to access or engagement with these services. By focusing on the analysis of awareness and utilization, the study contributes essential insights into the effectiveness of welfare schemes designed for senior citizens in the Konkan division, offering a basis for informed policy adjustments and outreach strategies.

Keywords : Government Welfare Schemes, Senior Citizens, Awareness, Utilization, Barriers

INTRODUCTION

The exploration of government welfare schemes for senior citizens in the Konkan Division highlights significant gaps in awareness and utilization among this growing demographic. With individuals aged 60 and above projected to reach 19% of India's population by 2050[2], addressing the social, economic, and health needs of the elderly is increasingly urgent. Despite the introduction of schemes like IGNOAPS, NPHCE, and Maharashtra's Shravan Bal Yojana[3], actual utilization remains low[4]. For example, Goswami et al. (2019) found that although 86.9% of elderly respondents were aware of welfare schemes, only 42.2% used them[5]. Barriers include bureaucratic hurdles, lack of digital literacy[8], social identity dynamics, and regional disparities[67]. In the Konkan Division, urban-rural contrasts—such as between Thane and Sindhudurg—may influence access. Local norms and limited outreach further affect scheme uptake. This study aims to examine these factors and inform targeted interventions to improve welfare delivery to senior citizens in the region.

NEED OF THE STUDY

India's growing elderly population requires welfare systems that are inclusive, accessible, and effectively utilized. Although the government has introduced various schemes for senior citizens, a significant gap persists between their availability and actual use, especially in semi-urban and rural areas[6]. Aging often brings financial dependence and health challenges, making government support crucial. In the Konkan Division, issues like poor infrastructure, regional disparities, and low literacy levels further restrict access[7]. The digital shift in application processes also poses challenges, as many elderly lack digital literacy and access to technology[8]. Additionally, social attitudes, family structures, and limited community support may affect the elderly's motivation and ability to seek help. Demographic factors such as age, gender, education, marital status, and living arrangements may influence both awareness and utilization. This study aims to explore these factors and offer insights to guide local authorities, NGOs, and policymakers in improving welfare outreach and service delivery.

Aim of the study

Analysing Awareness and Utilization of Government Welfare Schemes Among Senior Citizens in the KonkanRegion

Research Methodology

Objectives of the Study were

1. To assess the awareness of government welfare schemes among senior citizens.

2. To assess the utilization of government welfare schemes among senior citizens.

3. To identify the barriers to non-utilization of government welfare schemes among senior citizens.

Research Type: This is a **quantitative** study.**Research Design**:A **descriptive cross-sectional design** was adopted to assess and compare awareness and utilization levels among elderly populations. **Sample and Sample Size**The study included **750 senior citizens aged 60 years and above**, residing in selected urban and rural areas of the **Konkan Division, Maharashtra** .**Sampling Technique**: A **multistage sampling technique** was used. All six districts of the Konkan Division—**Mumbai, Mumbai Suburban, Thane, Raigad, Ratnagiri, and Sindhudurg**—were included. Within each district, **talukas** were selected using **simple random sampling**. From these talukas, **villages (rural)** and **census-enumerated blocks (urban)** were randomly selected. Within these, **stratified random sampling** was employed to select eligible elderly participants. **Tool Description**: Data was collected using a **structured questionnaire**, developed through literature review and expert validation. The questionnaire covered demographic details, awareness, utilization, and barriers related to government welfare schemes.
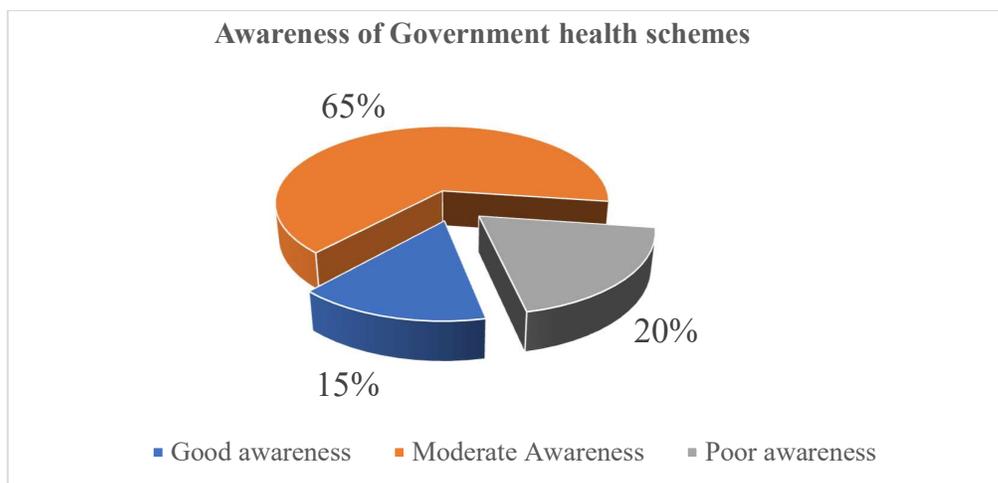
RESULTS

Figure No. 1 Awareness of Government health schemes

The Figure shows that Most of the senior citizens 491(65.47%) have moderate awareness, with 147 (19.47%) showing poor awareness, indicating a need for better education. Only 113 (15.07%) display good awareness, suggesting that a small proportion have a strong understanding of the subject. **District wise Government welfare schemes among senior citizen result** shows that Palghar senior citizens is having 33(29.2%) good awareness, followed by Thane 31(27.4%), while Sindhudurg records the lowest 3 (2.7%). Poor awareness is seen in Mumbai Suburban 99(67.8%), whereas Raigad has the lowest percentage of poor awareness 2 (1.4%). Thane and Palghar show a balanced distribution with higher levels of good awareness and minimal poor ratings, indicating relatively better awareness. Conversely, Sindhudurg and Mumbai Suburban reflect gaps in awareness, with Sindhudurg having the least percentage in the "good" category and Mumbai Suburban having the highest in the "poor" category. This data highlights the need for targeted interventions in regions with low awareness, particularly Mumbai Suburban and Sindhudurg, to improve the reach and understanding of government welfare schemes.

Utilization of government health schemes

Result shows that Most of senior citizens 578 (77.1%) show moderate utilization of available resources, while153 (20.4%) exhibit poor utilization, indicating limited or ineffective use of available options. Only a small percentage 19 (2.5%) fully utilize the resources.

Distribution of level of area wise Utilization regarding Government welfare schemes among senior citizen.

Result shows that In Mumbai region 2(10.5%) of responses reflect complete utilization of resources, while 76(13.1%) indicate moderate use, and 14 (9.2%) show poor utilization. Mumbai Suburban has 98 (17%) of responses showing moderate utilization, but a concerning 139 (90.8%) indicate poor utilization. Thane stands out with 5 (26.3%) reporting complete utilization and 134(23%) moderate utilization. Raigad showing 4 (21.1%) complete utilization and 72 (12.5%) moderate utilization, Ratnagiri shows 2 (10.5%) complete and 73 (12.6%) moderate utilization. Palghar also reflects strong performance with 4 (21.1%) complete and (14.7%) moderate utilization. Sindhudurg shows the lowest figures, with 2 (10.5%) complete utilization and 40 (6.9%) moderate utilization, highlighting the need for improvement in resource use.

Table :1 Schemes wise Awareness & Utilization of Government welfare schemes among senior citizen

Health welfare Schemes	Awareness		Utilization	
	f	*%*	*f*	*%*
Free OPD Care services at all government hospitals	583	77.7	516	68.8
Free In Door Admission facilities are there in all government hospitals	493	65.7	274	36.5
Blood Investigations are free in all government hospitals	368	49.1	258	34.4

Free elderly screening is done under the Ayushman Bharat scheme as well Health care is provided to senior citizens	473	63.1	244	32.5
Free physiotherapy treatment is provided in CHC and District government Hospital	108	14.4	0	0
Free tertiary care services (urology, orthopaedics, ophthalmology etc.) are provided under Regional Geriatric Centres	331	44.1	286	38.1
Weekly Geriatric Clinic at Primary Health Centre (PHCs	516	68.8	129	17.2
Free supportive devices are provided by government hospitals to senior citizens like hearing Aids, spectacles etc	724	96.5	657	87.6
Free radiological Diagnostic facility at all government hospitals	255	34.0	33	4.4
10 bedded Geriatric Ward at District Hospitals	194	25.9	7	.9
Separate queues for elderly persons in hospitals for registration and clinical examination	165	22.0	39	5.2
Provision for free OPD consultation from Specialists of CGHS empanelled hospitals after referral from CGHS Wellness Centre / CGHS Specialist	200	26.7	19	2.5

Health welfare Schemes	Awareness		Utilization	
	f	*%*	*f*	*%*
Direct free Consultation from Specialists at empanelled hospitals in respect of elderly CGHS beneficiaries aged 75 years and above	184	24.5	114	15.2

Pensioners of central government offices the facility to obtain medicines for chronic ailments up to 3 months under central government health schemes	325	43.3	295	39.3
Free consultation and yoga therapy under Yoga and Naturopathy.	338	45.1	383	51.1
Availability of free AYUSH Consultation in each government Hospital	404	53.9	338	45.1
Yoga parks	338	45.1	258	34.4
Senior Citizen Health Insurance Scheme (SCHIS)	404	53.9	244	32.5

The Table:1 denotes that More aware and utilized Services are Free supportive devices: 724 (96.5%) awareness, (657) 87.6% utilization. These services are highly known and used by seniors.

Free OPD care: 583(77.7%) awareness, 516(68.8%) utilization. Also well-known and frequently utilized. Free consultation and yoga therapy: Both have good awareness and usage, with 383(51.1%) utilization for yoga therapy.

Low Awareness and Minimal Usage services are Free physiotherapy: Only 108 (14.4%) awareness and no utilization .This suggests poor promotion and awareness. 10-bedded geriatric wards:194 (25.9%) awareness and just 7 (0.9%) utilization, indicating low usage due to both awareness and accessibility issues.

Moderate Awareness but Lower Utilized services are Free blood investigations: 368(49.1%) awareness and 258 (34.4%) utilization. There is awareness, but usage is lower, possibly due to access barriers.

Elderly screening under Ayushman Bharat:473 (63.1%) awareness and 244 (32.5%) utilization. Though more seniors know about it, many still do not utilize the service. Very Low Awareness and Utilized services are Separate queues for elderly (22.0%)awareness and only 39 (5.2%) utilization, indicating the need for better communication and access.

Free consultation from CGHS-empaneled hospitals: 200 (26.7%) awareness and 19 (2.5%) utilization, highlighting both low awareness and minimal use.

Table No: 2 Distribution of barriers faced by senior citizens in utilization of Government health schemes

n – 750

Barriers	f	%
More Waiting time	750	100
Inadequate medical facilities	671	90
Long distance	506	68

So much Crowded	490	65
No proper guidelines for registration	490	65
Rejected	385	51
Other	335	45
Unaffordable travelling expenses	245	33
Lot of paper Work	173	23
Non receipt of Funds	103	14
Paper work Incomplete	103	14
Behaviour of staff was not good	86	12
Staff were absent	64	8.5
Delay in Receiving Funds	19	2.5

Table No: 2 shows that all 750 (100%) Senior citizens face multiple barriers to accessing healthcare, with waiting time and 671(90%) inadequate medical facilities being the most significant issues. 506 (68%) Long distance to healthcare facilities and 490 (65%) overcrowding also limit access, particularly in rural or densely populated areas. Administrative challenges, such as unclear registration guidelines 490 (65%) and excessive paperwork- 173 (23%), create additional obstacles, while financial barriers, including unaffordable travel costs- 245 (33%) and funding delays 103 (14%), further hinder access. Rejected access-385 (51%) and staff-related issues like poor behaviour-86 (12%) and staff absence-64 (8.5%) contribute to negative healthcare experiences, though they are less common.

DISCUSSION

The study reveals that while 65.47% of senior citizens in the Konkan Division possess moderate awareness of government welfare schemes, only 15.07% demonstrate good awareness. This knowledge gap correlates with poor utilization—just 2.5% of participants fully utilized available services. Key barriers include long waiting times, insufficient medical resources, excessive paperwork, and unclear administrative processes. Rural regions like Sindhudurg reported even lower utilization due to geographic isolation and infrastructural limitations.

Socioeconomic disparities significantly influence awareness and utilization levels. Jithin et al. found that while a majority were aware of health insurance, utilization improved only among those who owned it. Despite 84% awareness of schemes like Ayushman Bharat, only 27% of individuals actually used the services[9]. The National Policy for Senior Citizens emphasizes social security, yet many elderly remain uninformed, limiting healthcare access[10].

Thangam et al. highlight that increasing life expectancy demands a strong support framework, as many elderly face financial and physical constraints that hinder engagement with welfare programs[11]. A study by D.U. Ahire and Dr. Rishipathak noted

that hospitals were key sources of scheme awareness and stressed the need for targeted promotion and simplified enrollment to boost participation[12].

Similarly, Sachin Jadhav's research in rural Maharashtra showed that musculoskeletal issues were the most reported morbidities, and financial limitations were a major reason for non-utilization of healthcare services[13].

Overall, these findings indicate a critical need to enhance awareness through community-based outreach and clear, simplified communication strategies. Improving infrastructure in rural areas, streamlining administrative procedures, and addressing financial and informational barriers are essential steps toward increasing the uptake of welfare services. Targeted interventions can significantly improve health outcomes and quality of life for senior citizens across the Konkan Division.

Recommendations

To improve the awareness and utilization of government welfare schemes among senior citizens in the Konkan Division, several targeted interventions are recommended. First, enhanced educational campaigns should be implemented, especially in districts like Sindhudurg and Mumbai Suburban where awareness is notably low. These campaigns should utilize localized content, vernacular languages, and age-friendly formats to effectively reach elderly populations.

Promoting underutilized services is equally essential. Awareness drives should highlight the benefits of schemes such as Ayushman Bharat and state-specific programs through community meetings, radio broadcasts, and health camps. Community health workers can play a vital role in educating and guiding the elderly through these processes.

Simplification of application procedures is critical. Reducing paperwork and offering assistance through helpdesks at primary health centers can ease the burden on senior citizens. In addition, introducing mobile assistance units can ensure coverage in remote and underserved areas.

Digital literacy training should be prioritized to enable the elderly to access schemes online. Workshops and peer-support groups can make digital platforms more accessible and user-friendly.

Finally, partnerships with local NGOs, self-help groups, and panchayats can strengthen outreach efforts. A coordinated approach involving multiple stakeholders will ensure better implementation, increased awareness, and higher scheme utilization among senior citizens.

CONCLUSION

While moderate awareness of welfare schemes exists among the elderly in the Konkan Division, actual utilization remains critically low. The study reveals that awareness and access vary significantly across districts, influenced by socioeconomic and infrastructural factors. Barriers such as complex procedures, low digital literacy, and limited outreach hinder scheme uptake. To improve utilization, a combination of simplified processes, community-based education, and personalized support is necessary. These efforts will help bridge the gap between policy intent and ground-level impact, ultimately enhancing the well-being and quality of life for senior citizens in the region.

Conflict of Interest and Funding

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