ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

Golden Ages and Emerging Needs:
Rethinking old Age Homes as Self Sustained Communities

Khushi Agrawal[1], Ar. Payal Musmade[2]

[1]Student: Dayanand College of Architecture Latur, Maharashtra, India

[2]As. Professor: Dayanand College of Architecture Latur, Maharashtra, India

DOI: https://doi.org/10.51584/IJRIAS.2025.100900065

Received: 01 Oct 2025; Accepted: 08 Oct 2025; Published: 17 October 2025

ABSTRACT

This study responds to the urgent need to consider in new way the purpose and image of old age homes in India as independent, freethinking, community-based homes. It addresses the existing stigma surrounding elder care centers and promotes spaces that value the autonomy, dignity, and gamut of emotion, cultural diversity of senior citizens. Through the combination of thoughtful design principles, concept anthropometric sensitivity, and intergenerational interaction, the research yields a scalable model that supports safety, freedom, and social interaction. It prioritizes efficiency through shared medical and recreational facilities and bridges the gap between elders and youth, but also addresses the growing problem of elder abuse, particularly in death ratio in urban areas. Finally, the study advocates for a shift in paradigm: rethinking images of old age homes from centers of loneliness into dynamic ecosystems where the elderly are regarded as valuable assets to society.

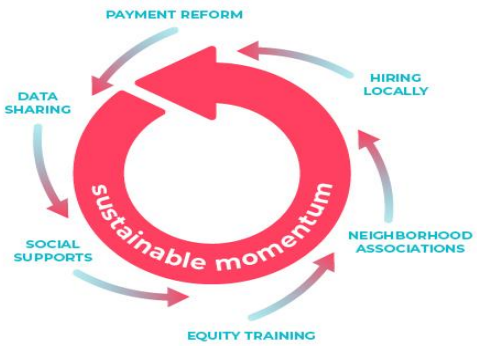
Key Words: Active-aging, self-sustained living, intergenerational communities & social inclusion, age friendly environments, elder care innovation.

INTRODUCTION

Idea of self-sustained community strike from:

Although such type of models are currently rare in India, they are necessary for senior citizen. They are dependent for their basic needs such as groceries, health check-ups, or social interaction and even for basic services. Senior citizen also need support and autonomy, but about designing a ecosystem by which they cannot depended on any other for their services— a system in which dignity, freedom and access are integrated into the design structure of daily existence.

Fig 1: Sustainable



Traditional models for caring the elderly - frequently rooted institutionalized isolation –are rethinking as more holistic, inclusive, and environmentally sustainable perspective. Engaging the elderly with intergenerational relationships, environmentally friendly, and healing spatial arrangements, the design of

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

self-sustained community is for the well-being of senior citizen, justify this master thesis. These include integrating housing, health care, lifestyle, and emotional support services into ecosystems where senior citizens are not only cared for but can also connect organically and well. The project conceptualizes an accepting aging from the heart, rather than from paternalistic systems of care, but on the basis of homes with caring and loving.

History

The first ever old age home in India : Raja Varma Old Age Home in Thrissur, Kerala was established as the first old age home in India in 1911 and later became a home for the destitute elderly. With charity acts by individuals, government and private organizations slowly old age homes became popular across the whole nation. Traditionally, these establishments offered a rudimentary dwelling and subsistence to those elderly persons who had no family or whose family was unable to support them. But the level of care and infrastructure varied considerably, with a number of institutions adhering not to a philosophy of rights but of welfare.

Following analysis shoes the core Problems & probable solutions for current situations:

Isolation → Inclusion: Elders are considered community assets, not burdens.

Dependence → Contribution: Models support elders to lead, guide and engage.

Charity → Sustainability: Local environments are in the way less dependent on foreign help.

Sterile Spaces → Therapeutic Surroundings: Design is good for your mental and cognitive health.

Ageism → Intergenerational Harmony: Elders and youth cohabitate, tell stories, and mind each other.

Why This Type of Community Not In India?

1. Cultural Expectations of Family Care: There's the fact that looking after elders are often viewed as something that is a family duty. It’s often seen as abandonment, or taboo — much as senior citizens abandoned in Zulu society.
2. Absence of Policy & Infrastructure Backing: Zoning regulations, land use laws and regulations for senior living are not there in India. Most homes for the elderly are unregulated.
3. Economic Constraints & Financial Dependency: Many senior citizens have no pensions or health insurance, and are priced out of living independently. NSSO data: senior citizen`s 3.8× share on healthcare spend with younger adults.
4. Urbanization & Shrinking Families: Migration, reduction in family size and nuclear families have disrupted the traditional support. But community-based alternatives haven’t expanded to fill the void.
5. Social Isolation & Stigma: Elders living solo can struggle with loneliness, safety and accessing medical care. Community models are still generally regarded as “a last resort,” rather than preferred options.

Why This Topic?

The study and research interest in the areas started when we visited Matoshree Old Age Home in Latur, in late 2024 , the space and feelings of the people living there reverted emptiness- the structure had all the attributes of a home but it did not have what a home would have- the emotional connectivity. The experience prompted distress about the dignity of older family members, leading to further thinking. A thought and a dream emerged in minds about a self-sustaining community of elderly people who live independently and with dignity, not dependence. In this vision, intergenerational spaces such as cafes, workshops and gathering areas connect the old and the young for authentic interaction. The same thought and concept motivated to carry on a detailed Thesis Project namely: `Self-Sustained Community for Senior Citizens which mainly focused to create inclusive, therapeutic ecosystems that cultivate courage, pride, and joy in the lives of older adults.

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

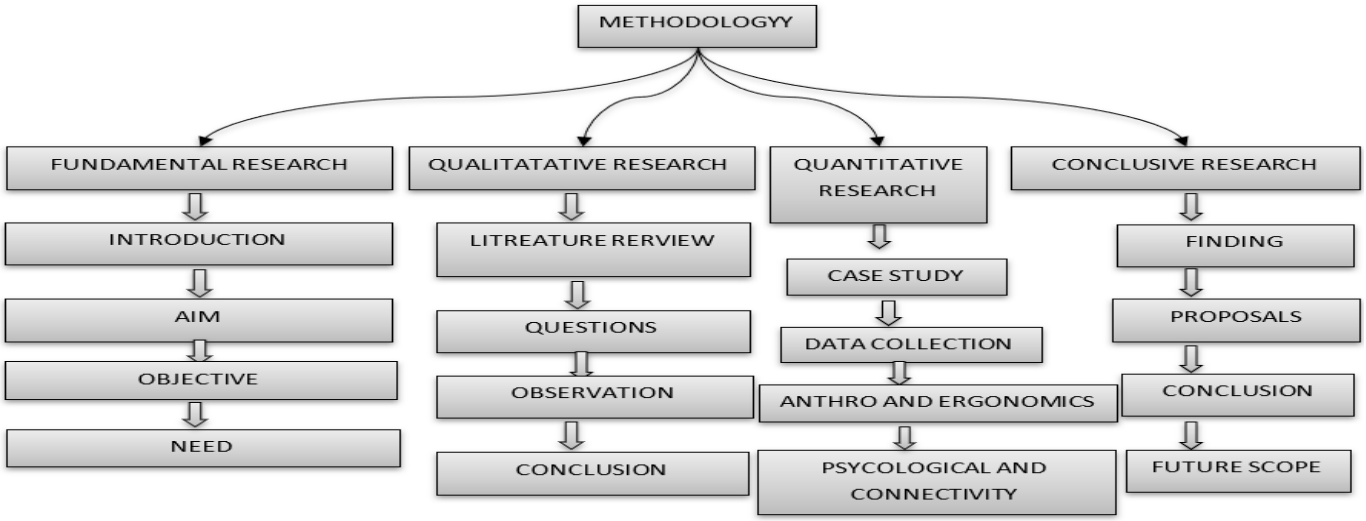
Aim

To provide a new perspective, living preferences and abilities of old age homes in India as a community for senior citizens that they will be self-dependent and helpful for our society.

Objectives

1. To change the perspective and personality of old age home in India.
2. To Improved user activities to get freedom.
3. To change the appearance and importance of these type of community.
4. To use proper anthro for diverse need of elder people.
5. To change their thinking they are not burdens they are goldens.
6. To eradicate the stigma and bad impression of old age centers in society.

METHODOLOGY



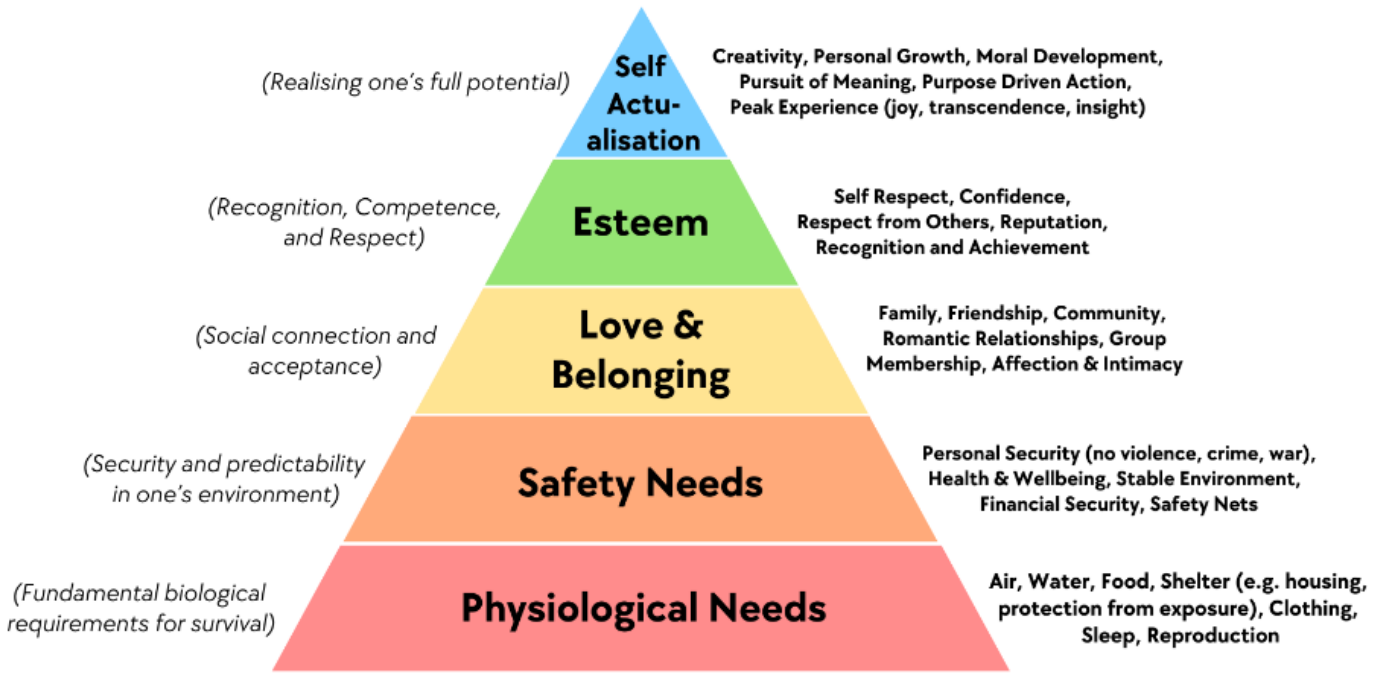


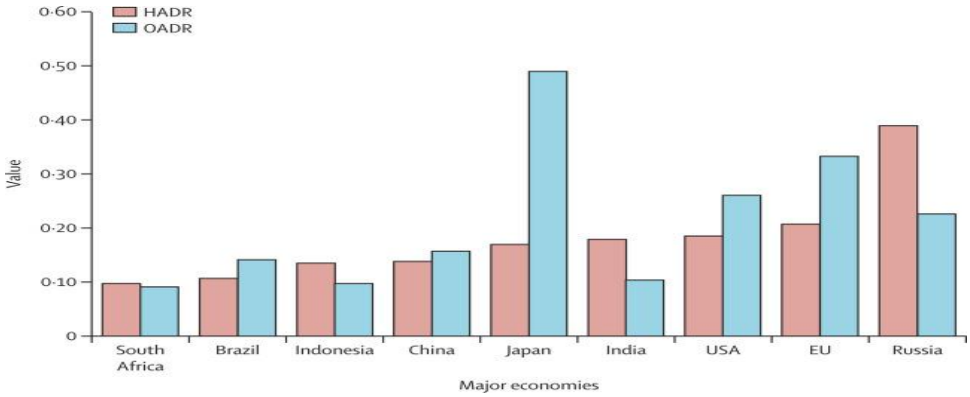
Fig 2: the Role of Psychology in the Hospitality Industry By Ms. Chitra Sharma - Assistant Professor

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

LITERATURE REVIEW

Who Suggested

Fig 3: Who Suggested



- Some form of abuse is very common in senior citizens in community.
- Rates of abuse of senior citizen are high in institutions such as nursing homes and long-term care facilities
  report says that they have committed abuse in the past year. Rates of abuse of people above 60 have increased during the pandemic.
- Abuse of senior citizens can lead to serious physical injuries and long-term psychological consequences.
- Abuse of senior citizens is predicted to increase in many countries which are experiencing rapidly ageing populations
- As per this study, the global population of people of age 60 years and above will increase more than double, (Approx. 900 million in 2015 and 2 billion in 2050)

.

Table 1: Number of Persons aged 60 years and above (in '000s) as on July 1, 2021	
All WHO Regions	1081903.00
China	258372.00
India	144322.00
Source : WHO Data Platform	

Table no 1: WHO, 2022. Indicators of Maternal, Newborn, Child and Adolescent Health and Ageing

Worlds Second Largest Population and Condition of Elder Person In India

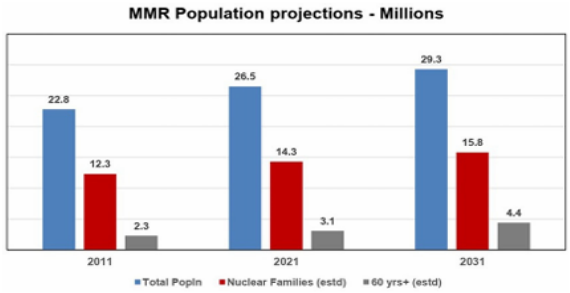
As per the study conducted United Nations Department of Economic and Social Affairs, India, which is the world's second most populous country, has experienced a dramatic demographic transition in the past 50 years, the population over the age of 60 years is increases.

This pattern is praised to continue. It is estimated that the percentage of Indians aged 60 and older will rise from 7.5% in 2010 to 11.1% in 2025. This is a bit growing percentage point increase, but a remarkable figure in absolute terms. According to UNDESA data on projected age structure of the population India had more than 91.6 million elderly in 2010 with an annual addition of 2.5 million elderly between 2005 and 2010. The

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

number of elderly in India is projected to reach 158.7 million in 2025 and is expected, by 2050, to surpass the population of children below 14 years.

Fig 4: 2.4mn Seniors Will Be Living Alone in Mumbai Region



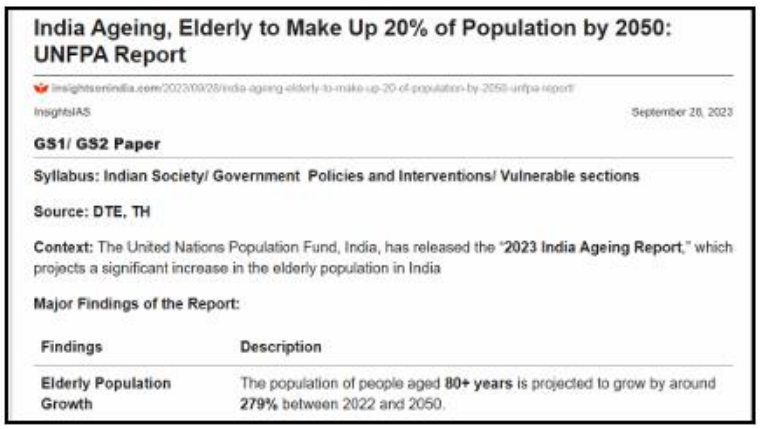
By 2031: Report Money life Digital Team 12 April 2023

Community Living: 80% of respondents felt staying in a like-minded community is key, away from the hustle and bustle of city life but yet connected to Mumbai is what matters to them when it comes to planning for an old age living

"Respondents averred that a good living abode would help meet the best years of their lives ahead in a peaceful manner," the report says adding,

"While there were several expectations, the respondents also cited there problems such as the inability to find good, reliable domestic help for doing mundane works or unseen disruptions to an otherwise peaceful and relaxing life."

Fig 5: Insightonindia.com 2023/09/23/India-aging-elderly


India Ageing, Elderly to Make Up 20% of Population by 2050: UNFPA Report

insightsonindia.com/2023/09/23/india-ageing-elderly-to-make-up-20-of-population-by-2050-unfpa-report/

InsightsIAS September 28, 2023

GS1/ GS2 Paper

Syllabus: Indian Society/ Government Policies and Interventions/ Vulnerable sections

Source: DTE, TH

Context: The United Nations Population Fund, India, has released the "**2023 India Ageing Report**," which projects a significant increase in the elderly population in India

Major Findings of the Report:

Findings	Description
Elderly Population Growth	The population of people aged **80+ years** is projected to grow by around **279%** between 2022 and 2050.

- The Indian 60 above population is increasing faster at 3.8% from 2% previously.
- This is based on the 2011 census where the senior citizen number was estimated at 103mn, accounting for 8.6% of the Indian population.
- By 2021, the number has increased to 139mn, accounting for 10% of the total population.
- Life expectancy at birth in India was 69 years in 2014, expected to be 71 years in 2030 and projected to increase to 75 years by 2050.

LITERATURE CASE STUDY

Kochi Age Friendly Cities Network

Historic Milestone: Age-friendly city Kochi is the first city in the country and second in WHO South-East? Asia Region to be a part of the WHO Global Network for Age-friendly Cities and Communities (GNAFCC): A

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

network of cities that make an extra effort. To ensure their structures and services are suitable for people of all ages. (Kochi Becomes Part Of Who Age-Friendly Cities Network)


World Health Organization

WHO Global Network for Age-friendly Cities and Communities

This is to certify that

Kochi

is a member of the
World Health Organization's
Global Network for Age-friendly Cities
and Communities

Members of the Network share and promote the values and principles of the World Health Organization's age-friendly approach, commit to creating age-friendly environments and agree to participate actively in the Network.

Thiago Hérick de Sá
WHO Global Network for Age-friendly Cities and Communities
Department of Social Determinants of Health
World Health Organization
Geneva, Switzerland

Fig 6: Kochi Is a Member of WHO

Vision & Framework

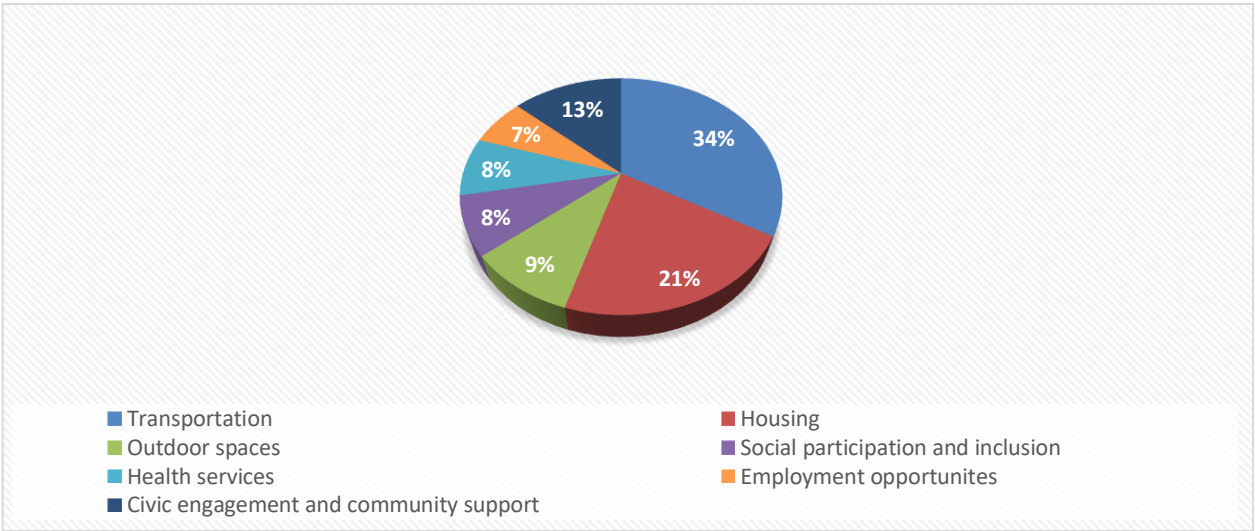


Fig 7: Pie Chart showing the Improving Seven frameworks

The program focuses and encourages cities to improve on these seven things:

1. Transportation
2. Housing
3. Outdoor spaces
4. Social participation & inclusion

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

5. Health services

6. Employment opportunities

7. Civic engagement & community support.

Demographic Context as per in India:

The number of the elderly in India (aged 60 and older) was 104 million in 2011 (8.6%) and is estimated to rise to 317 million by 2050 (19.1%).Kerala already comprised 12.6% elderly in 2011, and is expected to rise to 22.8% of the population in 2036, taking the lead in age-related policies and care delivery mechanisms.

Support Programs in Kerala:

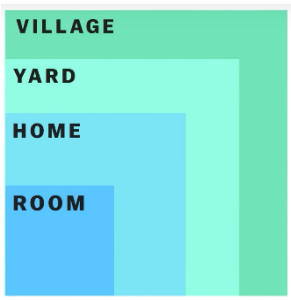
1. Vayomithram: Portable health care, counselling and palliative care
2. Vayoraksha: Protection from abuse and neglect
3. Sayamprabha Home Scheme: Social Life and Better Access to facilities

Hogeweyk Village In Netherland

The Hogeweyk Dementia Village, located in the Netherlands, is delivering new standards of elder care, significantly altering the tradition of institutional style elder care to one determined by lifestyle and design- and one in the community. Founded in 2009 by the Vivium Care Group, it has 27 themed homes located in a secure village-like community with shops, cafes, gardens and cultural facilities. The Carrier Houses' eight residents—each living with advanced form of dementia— are assisted through structured activities, sensory-rich

environments, and the provision of Resident Directed Care, a person-centered approach emphasizing independence and respect. Staff work as neighbours, not therapists, providing social opportunities that arise organically and without clinical overtones

Fig 8: The Hogeweyk - Normal Life for People Living With Severe Dementia



Jagruti Centre , Navi Mumbai

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

Fig 9: Image Of Jagruti Rehabilitation Centre

1. Assisted people living there provides help with daily activities like dressing, eating, or bathing to encourage independence.
2. Medical care such as healthcare, medical care, and monitoring for geriatric mental health and consultation
3. Cognitive therapy for proper care peoples, such as memory stimulation and routine-based zoning, for patients with Alzheimer's and dementia .Physical activities and treatments help maintain moments and risk of fall, which are key components of rehabilitation and physiotherapy.
4. Engaging in society include social activities that increase interaction, individual interests, and sensory can erase the lone.
   With mentally
5. Routine structure as in daily exercise promote the basic health check-up.
6. Study include that the independence, comfort, and dignity, supporting the idea about emotionally supportive, self-contained senior communities.

Suvidha Retirement Village, Banglore

Suvidha with 180 cottages, a beautiful set up of lush greenery with a 3 acre water body, boasts of all modern day amenities with peaceful walkways, a meditation centre, gymnasium, etc.

One can go for walks or enjoy the sunlight. Sports enthusiasts use the badminton court and the indoor games facilities like chess, carrom, table tennis, etc. You can even spend time reading books or newspaper in the library or catch up with your favourite matches or programs on TV along with other residents in the lounge area. Hang out with other retired persons on occasion of events and parties and any time at the community centre.

The vegetarian kitchen is operational. As the critical mass of consumers of non-vegetarian food is yet to be reached, the fully equipped non-vegetarian kitchen has not yet been commissioned

Health Club Section

- Gym
- Yoga
- Massage centre

Others

Fig 10: cottages of elder people in Suvidha village

- Car Parking
- Golf carts for easy movement
- Near zero noise and environmental pollution
- Security: Round the clock Lockers are available for shareholder

Club

Fig 11: interior living of elder people in Suvidha village Philosophy

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

- Dining Area
- Badminton court
- Table tennis
- Chess
- Carrom
- Billiards
- Library
- Parlor
- Recreation areas

The Difference Begins with Our Philosophy

- The philosophy of care, in both our continuing care and on demand care, is about empowering individuals to create their own definitions of aging. Our vision is to provide the facilities that fulfil.
- Our Philosophy Emphasizes Personal Empowerment.
- Because we offer various levels of care, you can enjoy today knowing you have planned for your future.
- Should you need care, we are prepared to evolve with you and strive to provide an individualized, holistic approach to care and wellness

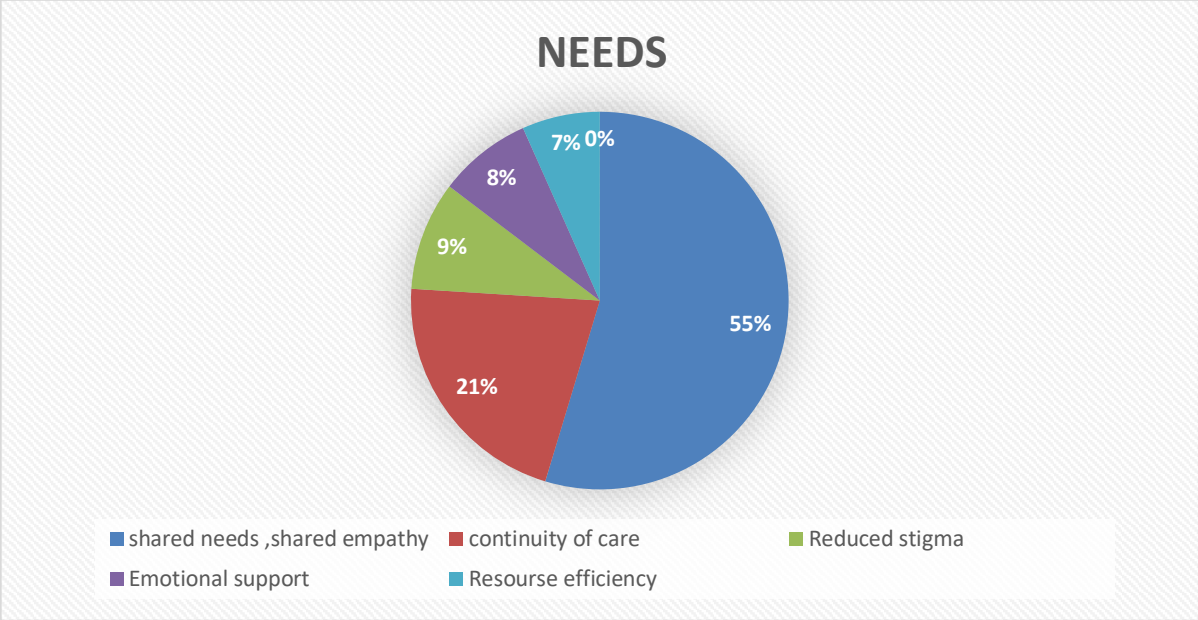
Fig 12: Environment and Facilities of Suvidha Retirement Villages in Bangalore

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

Data Collection

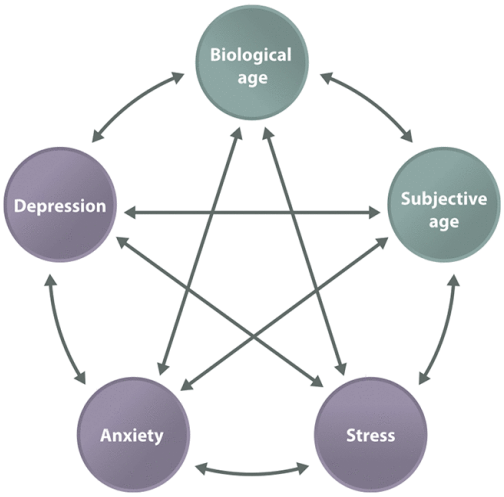
Why Elderly And Diverse Needs Individuals Together?

Fig 13: Pie Chart of essential needs of elder people



- Shared needs & empathy: Both groups benefit from calm spaces, routine and inclusive design. Their sharing of needs provides a basis for understanding one another.
- Continuation of care: Dementia may strike individuals at an advanced age. A reliable transition from one to the other, without having to rip up lives.
- Less Stigma: Normalizing dementia in an elder-friendly context and you encourage understanding, lessen fear and shame.
- Emotional support: The elderly often get lonely. Sharing life with others who have gone through the same experiences helps to create bonds of friendship and emotional
- Resource efficiency: Shared medical, recreational, and support services reduce costs and improve quality of life.

Fig 14: The mind-body connection. Biological age and subjective age are connected with a variety of physical and emotional diseases and may be directly linked



Strong Motives For Living Together

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

Here's what makes your concept compelling:

Table no 2: Motive Underlying Reasons or Force That Prompts an Action and Maintain Goal-Directed Behavior

Motive	Why It Matters
Human dignity	Everyone deserves to age with respect, in any case of cognitive ability.
Social inclusion	Combats loneliness and marginalization by creating a vibrant, interactive and connective community.
Empowerment	Residents are not passive recipients of care—they contribute, engage, and root
Safety and autonomy	Creating Thoughtful design that allows freedom with in safe boundaries, independence.
Sustainability	Shared gardens, energy structure, and food production promote ecological and social

Why Focus Only on Elderly regional for community?

- **Targeted design**: tailor every element from signage to sensory gardens—to their unique needs.
- **Policy relevance**: Dementia and aging are global public health priorities.
- **Scalable model**: Starting with a focused group allows for testing and refinement before expanding to broader populations.
- **Interpenetrated:** support that might help for changing the eyes of things that are bad for older centres and making invisible line between the elder and the youth.

Need

Comparative Analysis In Mumbai

Key Features-

Table no 3: Comparison Chart of Some of the Top-Rated Old Age Homes in Mumbai, Highlighting Their Key Features, Services, and What Makes Each One Stand Out.

Name of Facility	Location	Key Features	Pros	Cons
Jagruti Rehab	Various branches in India	24/7 medical care, dementia & psychiatric support, rehab services, consultation	Specialized in dementia care, medical staff on-site	Higher cost for advanced care facilities
Olive Elder Care	Various in Mumbai	Luxury rooms, emergency care, art/music therapy, consultation care	High-end comfort, emotional support programs	Premium pricing afford by high class
Dignity Lifestyle Retirement	Neral (near Mumbai)	Landscaped campus, assisted living, wellness activities	Peaceful setting, strong medical support	Outskirts
Aaijidevi Care	Kandivali/Borivali	Home care, hygiene and peaceful	High ratings, professional staff	Limited amenities

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

Foundation				
Little Sisters of the Poor	Byculla	Free/low-cost care, spiritual programs, basic facilities cultural	Ideal for low-income seniors	Limited medical specialization
Anandvan Wellness Centre	Nallasopara (West)	Day-care, yoga, art therapy, medical support	Holistic care, community events	Distance from central Mumbai
St. Anthony's Home for the Aged	Bandra	Permanent/temporary stays, spiritual care, library	Affordable, long-standing reputation	May have waiting lists
Adharwad Old Age Ashram	Navi Mumbai	Alzheimer's & paralysis care, short/long-term stays	Flexible pricing, strong medical focus	Basic infrastructure

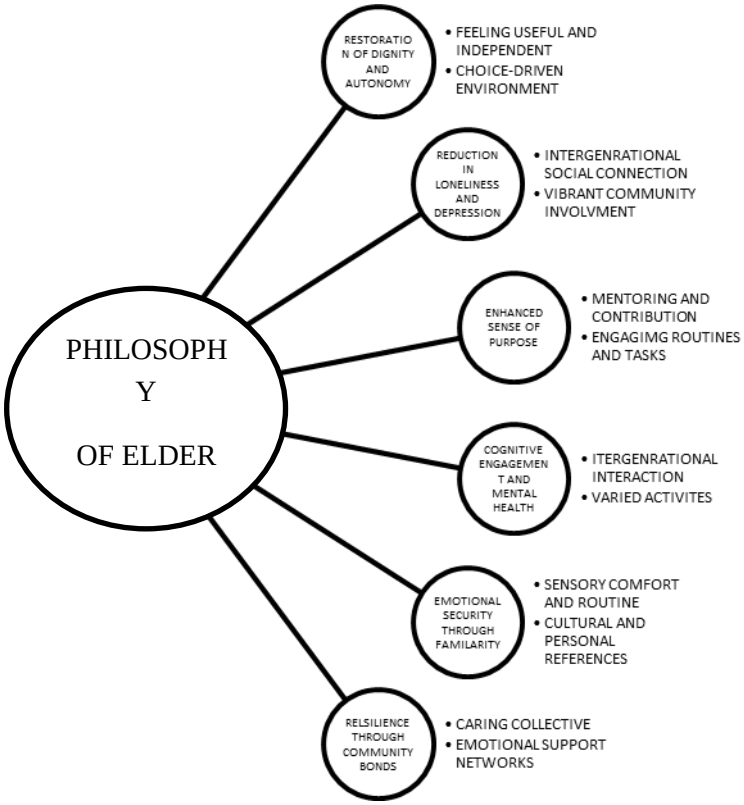
Architectural Features

Table no 4: Architectural Features That Directly Impact The Comfort, Safety, And Dignity Of Elderly Residents—Especially Those With Dementia. As Per the Study Done On Architectural Highlights and Updated the **Pros and Cons** to Reflect Design-Related Strengths and Limitations

Name of Facility	Location	Architectural Highlights	Pros	Cons
Jagruti Rehab	Various branches in India	specially dementia units, wide corridors, anti-skid floorings, natural light	Specialized layouts for neuro care, medical zones well segregated	Feel of institutional in some branches
Olive Elder Care	Various in Mumbai	Luxury interiors, barrier-free access, greenery courtyards, sensory gardens	Luxury ambiance, therapeutic outdoor spaces	highly cost, may feel exclusive and luxury
Dignity Lifestyle Retirement	Neral (near Mumbai)	Central courtyard design, walkable loops, private balconies, eco-friendly materials(are used)	Peaceful, nature connected design, aging-in-place layout	Outskirts, limited emergency access
Aaijidevi Care Foundation	Kandivali/Borivali	Small spaces, efficient layout, ramps, grab bars, shaded entryways	Affordable, easy to access	Smaller rooms, limited green areas
Little Sisters of the Poor	Byculla	Heritage-style building, chapel, communal dining hall, basic dormitory layout	Spiritual ambiance, large open ambience	Aging infrastructure, limited privacy in connectivity
Anandvan Wellness Centre	Nallasopara (West)	Open-air verandas, meditation zones, wide doorways, natural ventilation and natural light	Well-designed architecture and structure	Between the central Mumbai
St. Anthony's Home	Bandra	Simple layout, library, prayer room, shared rooms with garden views	Calm setting, spiritual and social spaces	Shared accommodations may lack privacy
Adharwad Old Age Ashram	Navi Mumbai	Ground-floor access, shaded walkways, basic dormitory-style rooms	Easy access for mobility-impaired, low-cost design	Minimal aesthetic appeal, limited personalization

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

Psychological Design And Connectivity



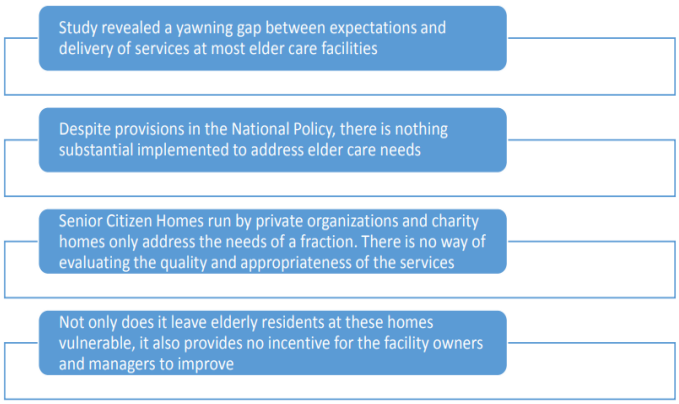
"Philosophy of Elder" that emphasizes self-worth, heart health, betterment social connection. A key part is giving back self-rule & importance; care for self. It seeks to stop lone feels by linking the old, young people through lively group acts. Mental activity boosts a variety of work with varied tasks. The health encourage through by share of familiar own and gentle physical; kind safe and homely environment program spots. Stronger with supports, strong by help, emotional support and helping the connective of health

Tata Trust : Report Om Old Facilities In India

Baseline Of Standards And Prevailing Norms:

The study experience of states as well as the norms and practices prevalent at the facilities presently Madhya Pradesh and Daman & Diu; interviews with experts, practitioners and government officials and visits to actual facilities, to understand the experience and reasons behind the things

Fig 16: Tata Trust: Report Om Old Facilities in India



ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

Given the variety of facilities present now, the sample covered different types of facilities including those in major cities such as Delhi and Mumbai, old age homes in tier-2 cities such as Coimbatore and Pune, old age homes for the lower-economic class, old age homes for middle-class and upper-middle class and senior living developments ranging from economy to luxury in different parts of India all classes

Mental And Emotional Connectivity

Connectivity Of Other Age Group

Intergenerational Connectivity through Occasional Events & Youth-Oriented Spaces

Workshops as Bridges of Skill & Story tech savvy

Designing events were the young people meet the senior citizen for exchanging knowledge:

- **Traditional Craft Revival**: Elders teach weaving, pottery, embroidery; youth reinterpret them with modern aesthetics.
- **Storytelling & Oral History Labs**: Elders share life experiences, youth document them through film, zines, or podcasts.
- **Healing & Wellness Workshops**: Elders lead sessions on Ayurveda, yoga, or folk remedies; youth bring in fitness trends or mental health awareness, online classes and vlog of the life style and the sessions

These events are seasonal, weekends, festival or any occasional workshops bases that events gives linking between the youths and senior citizens

Youth Festivals with senior engagement

Make youth-centric events inclusive of elder wisdom and presence:

- **Music & Dance Fests**: Invite elders to perform folk songs or judge dance battles.
- **Hackathons or Design Jams**: Include elders as "users" or "clients" for empathy-driven design challenges.
- **Cultural Carnivals**: Feature elder-led stalls, games from their childhood, or intergenerational fashion walks.
- **Food stalls** : cultural cuisines for occasional

This flips the narrative—elders aren't passive observers but honoured contributors.

Shops & Cafes Designed for Youth, Welcoming Elders

Create youth-oriented commercial spaces that subtly invite elder interaction:

- **Pop-up Shops**: Sell youth-made crafts, with elders offering traditional versions or co-creating.
- **Memory Cafe Corners**: Inside youth cafés, have a "Memory Booth" where elders share stories or advice.
- **Thrift & Upcycle Stores**: Youth curate fashion, elders contribute vintage items or styling tips.
- **Expressing tables** : where the youth express their life things that is now very hard and elders advise them and vice versa

These spaces become informal zones of exchange—no obligation, just curiosity and connection.

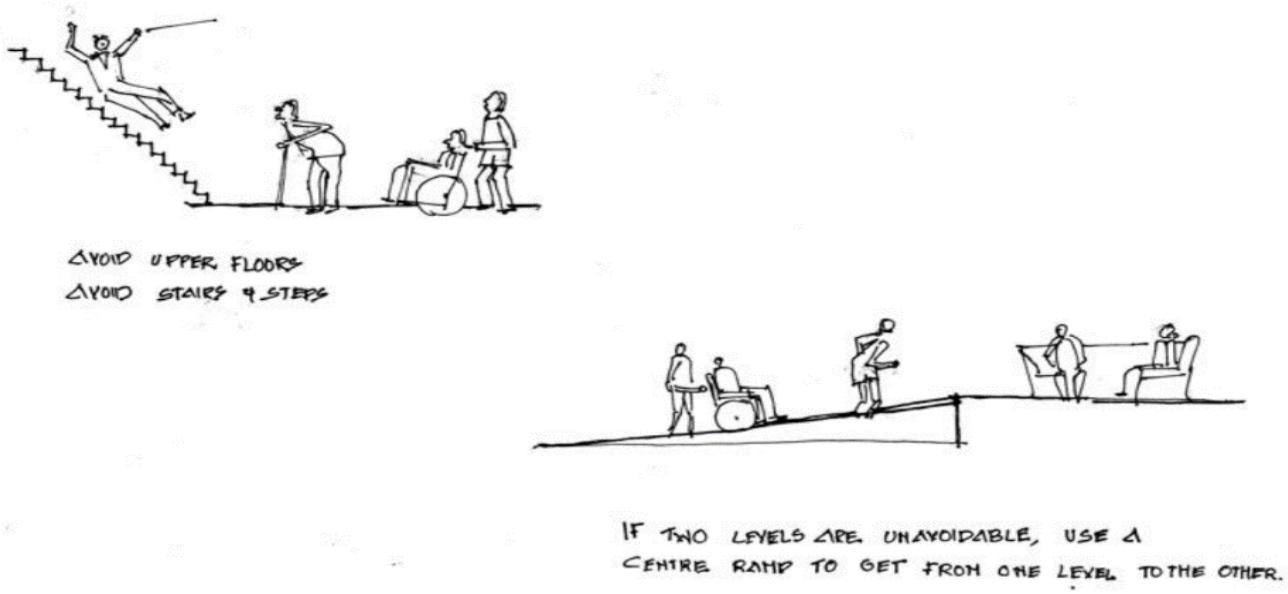
Findings of Data Collection:

Occasional events are for emerging senior citizens, interactions between generations through events, programs

and festivals and youth oriented spaces –design to cultural continuation and economy enrichment

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

Anthrometric Design And Ergonomics



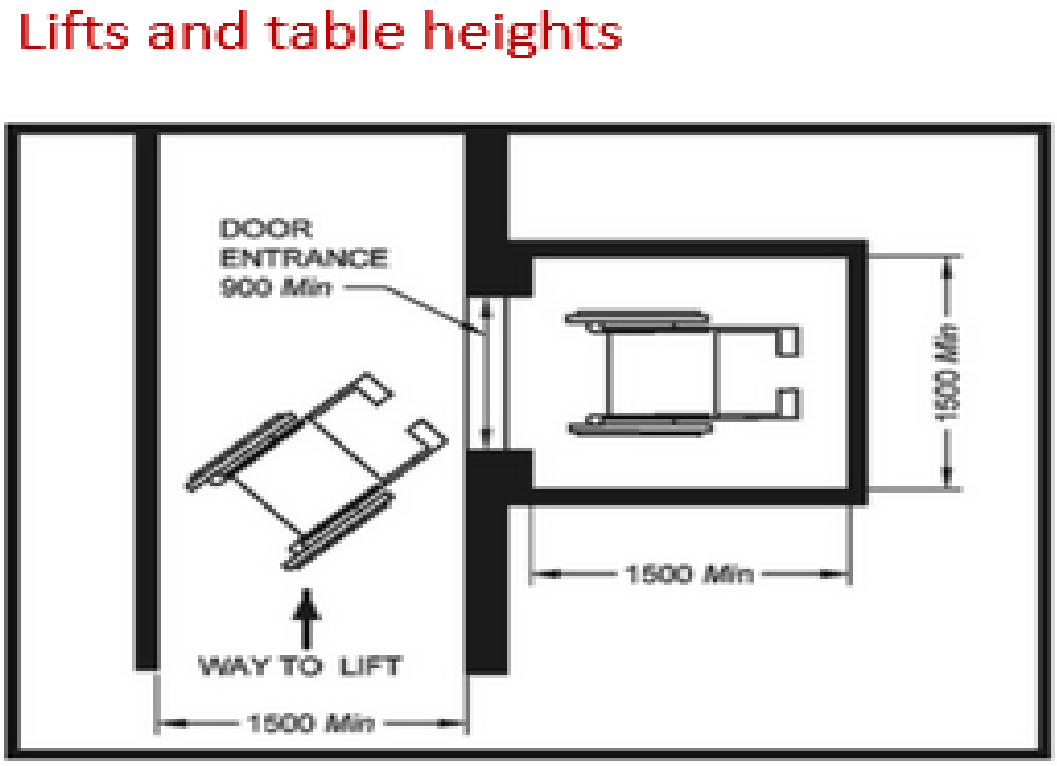


Fig 10.1.23 Lift size
Source NBC 2016 volume 1

Fig 17: Anthrometeric and Ergonomics of Elder People With All Diverse Needs

10.1 NATIONAL BUILDING CODE

Anthropometrics And Requirements For Accessibility In Built – Environment For Elders And Persons With Disabilities

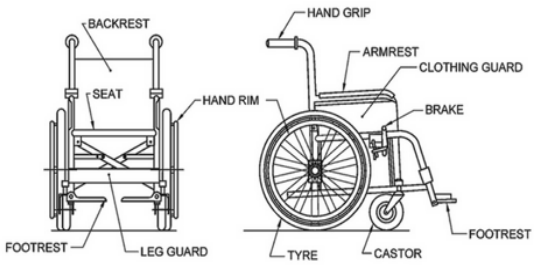


Fig 10.1.1 Nomenclature of basic elements of wheelchair
Source NBC 2016 volume 1

Manual wheelchair dimensions are as follows :

a) Overall length: 1000 mm-1100mm
b) Overall width, open: 650 mm-720mm
c) Overall width, 300 mm-330 mm folded
d) Overall height: 910 mm-950 mm
f)Distance between: 400 mm-450 mm seat and footrest
e) Seat height from: 480 mm-510 mm floor at the front
g) Arm rest height: 220 mm-230 mm from seat
h) Seat depth: 420 mm-440 mm
i) Clearance of foot-:90 mm-200 mm rest from floor
j) Clearance of frame: 90 mm, Min from floor
k) Wheelchair footrest: 350 mm (deep)
1) Wheelchair castor: 12 mm width
m) Weight of the: 25 kg, Max wheelchair (basic model)

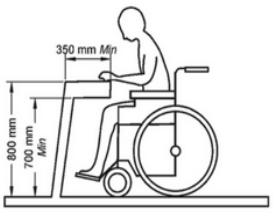


Fig 10.1.2 Necessary space under counter or stand for ease of wheelchair users
Source NBC 2016 volume 1

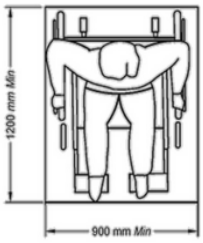


Fig 10.1.3 Clear floor space
Source NBC 2016 volume 1

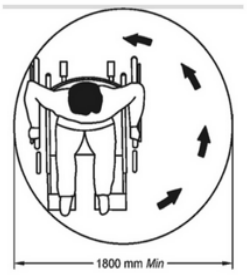


Fig 10.1.4 Preferred comfortable turning radius
Source NBC 2016 volume 1

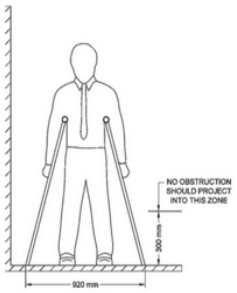


Fig 10.1.5 Passage way required for people who uses walking aids
Source NBC 2016 volume 1

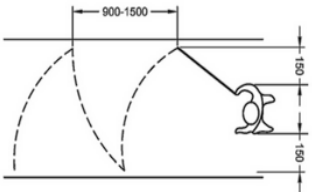
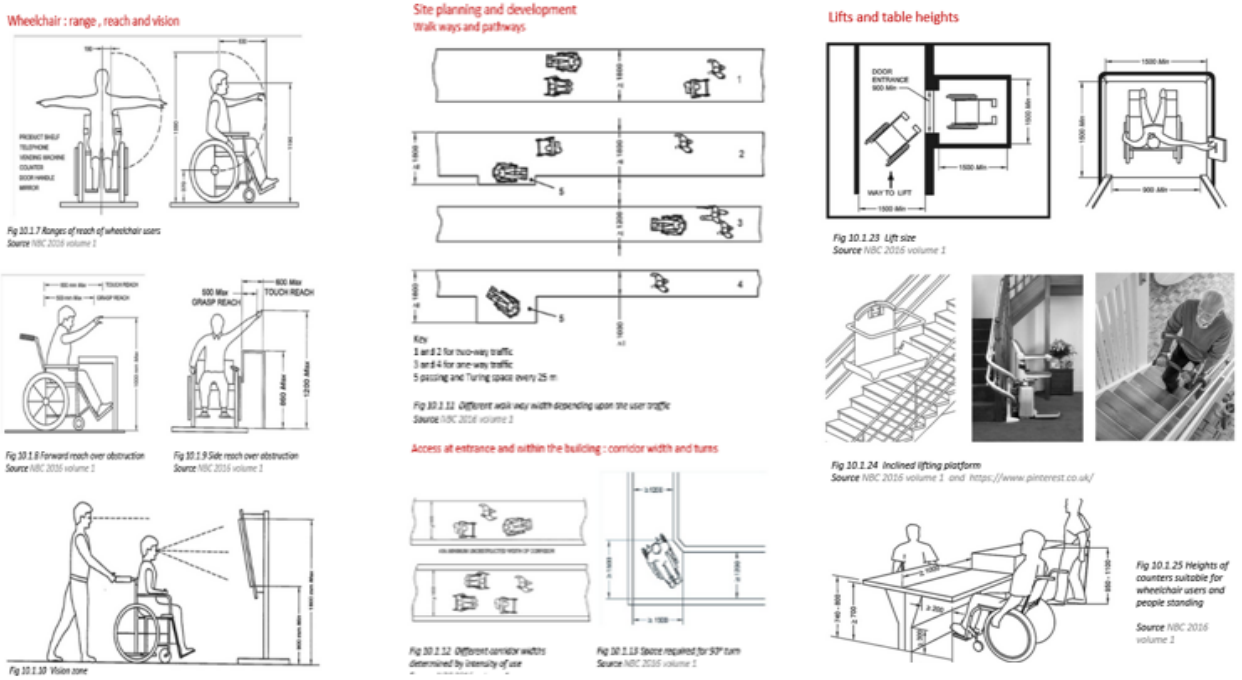


Fig 10.1.6 Space allowance (radial range) for people using white canes
Source NBC 2016 volume 1

Source NBC 2016 Volume 1

Fig 18: Anthrometeric and Ergonomics of Elder People With All Diverse Needs Source NBC 2016 Volume 1



ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

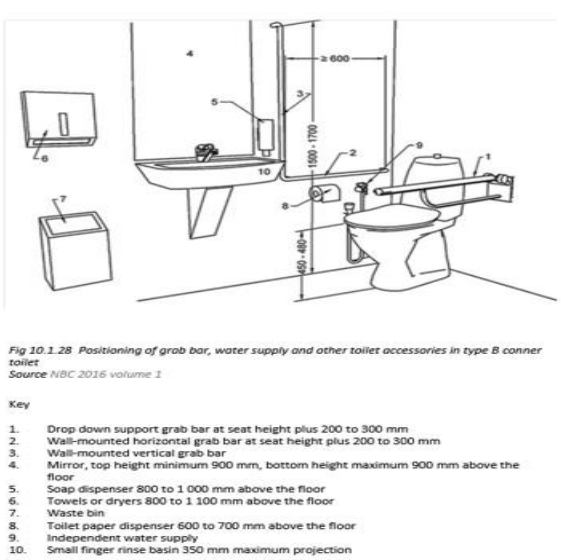


Fig 10.1.28 Positioning of grab bar, water supply and other toilet accessories in type B conner toilet
Source NBC 2016 volume 1

Key

1. Drop down support grab bar at seat height plus 200 to 300 mm
2. Wall-mounted horizontal grab bar at seat height plus 200 to 300 mm
3. Wall-mounted vertical grab bar
4. Mirror, top height minimum 900 mm, bottom height maximum 900 mm above the floor
5. Soap dispenser 800 to 1 000 mm above the floor
6. Towels or dryers 800 to 1 100 mm above the floor
7. Waste bin
8. Toilet paper dispenser 600 to 700 mm above the floor
9. Independent water supply
10. Small finger rinse basin 350 mm maximum projection

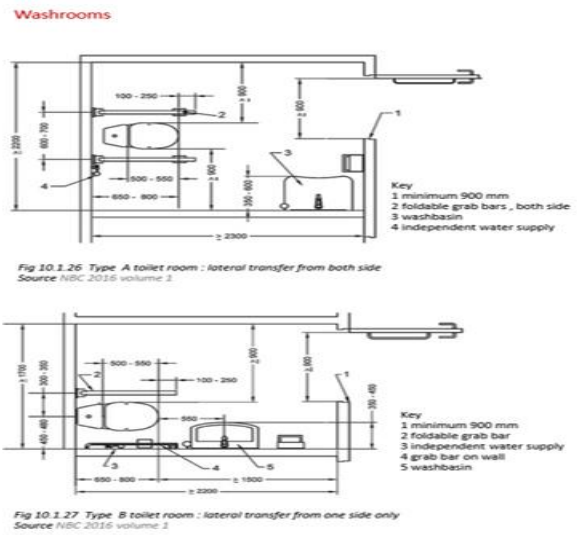


Fig 10.1.26 Type A toilet room : lateral transfer from both side
Source NBC 2016 volume 1

Fig 10.1.27 Type B toilet room : lateral transfer from one side only
Source NBC 2016 volume 1

Fig 19: Anthrometeric and Ergonomics of Elder People With All Diverse Needs Source NBC 2016 Volume 1

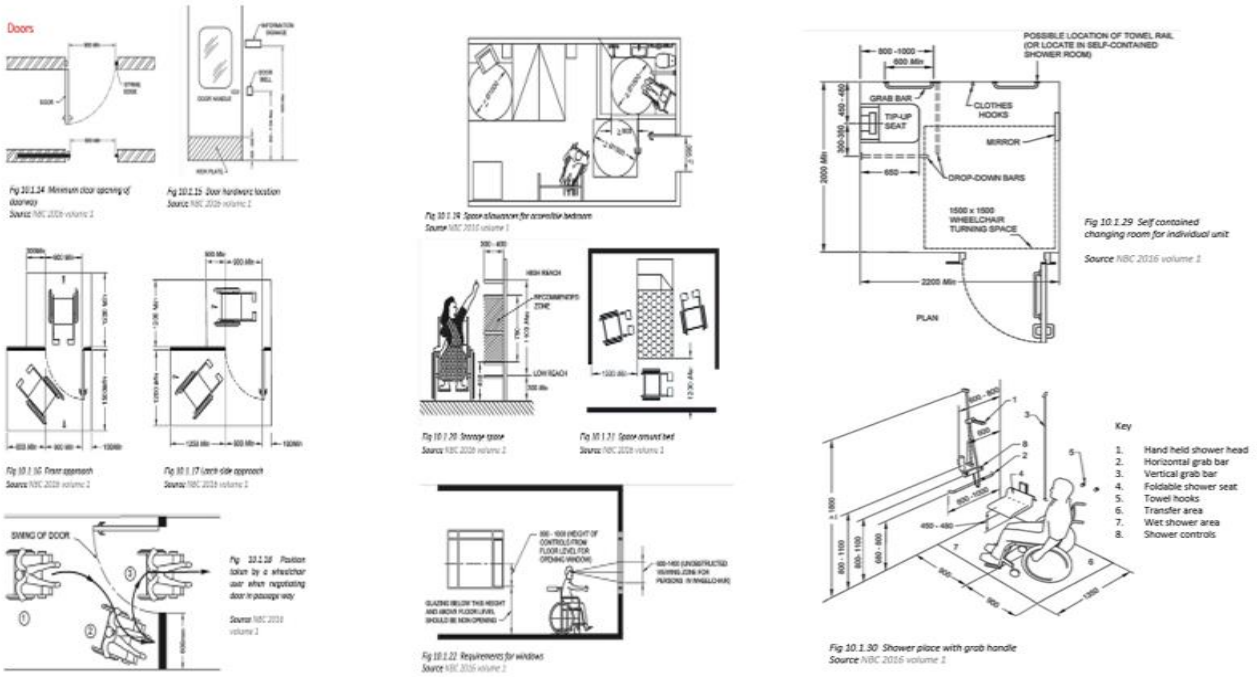
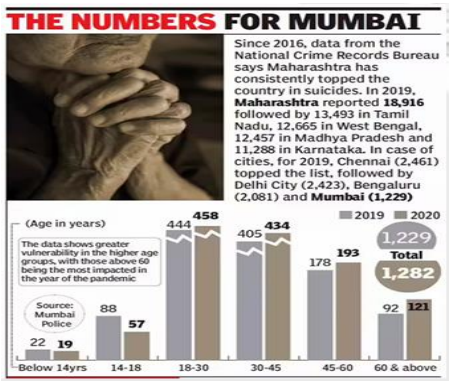


Fig 10.1.29 Self contained changing room for individual unit
Source NBC 2016 volume 1

Fig 10.1.30 Shower place with grab handle
Source NBC 2016 volume 1

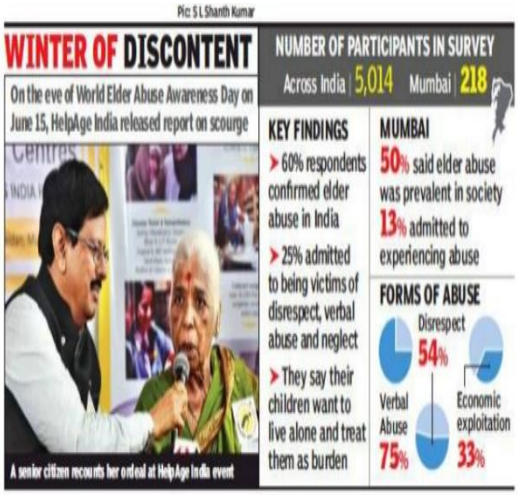
DATA ANALYSIS

Fig 20: As per analysis done by Times of India (TOI) the ratio of abuse of people above 60 years is increased by 50%.



ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

Fig 21: As per the analysis done by TOI the death ratio of people above 60 years keeps increasing year by year due mental manipulation and depression.



The State has 36 functional IDSP units in places. The proportion of Communicable, Maternal, Neonatal, and Nutritional Diseases [CMNND] contribute to 22.27% of total disease burden (GBD 2019) with diarrheal diseases, lower respiratory infections & drug-susceptible TB being the major causes of death in the State. As per QPR reports, the annualized total case notification rate for TB is 161% and NSPu success rate is 74% as opposed to the national average of 163% and 79%, respectively. For NLEP v, the reported prevalence rate of 1.19 per 10,000 population is higher than the national average of 0.61. In FY 2019-20, deaths from vector borne diseases include 8 due to malaria, 29 due to dengue, while none due to Kala azar.

FINDINGS

1. Emotional support: The elderly often get lonely. Sharing life with others who have gone through the same experiences helps to create friendship bond and emotional Resource.
2. Efficiency: Shared medical, recreational spaces, support services 24/7 care, reduce costs and improve quality of life.
3. Scale model: Targeted design and social inclusion to create a scale model of old age home
4. Vulnerability: Abuse of older people increases year by year and the ratio of abuse is more densely in populated area
5. Integrated Support: This might help for changing the eyes of things that are bad for older centres and making invisible line between the elder and the youth.
6. Thoughtful design: Design that allows freedom within safe boundaries, preserving unavoidable independence

Hence the transformation of community of senior citizens highly needed.

PROPOSAL

1. Kochi is the first city which be name as age friendly community member of WHO. Because of rapidly growth of aging population and due to lack of structures and facilities they making all the possibilities to ensuring nuclear families
2. Hogeweyk dementia village is properly designed for the dementia people with vulnerable facilities and also proper health care they change the structure into village that gives help to the care taker, other age people and mental connection that all of are ones without any difference of negative emotions
3. Suvidha retirement village is for retired people they live there with proper dignity and with well beings and they live there as own house proper care and maintain cut lack of cultural stigma
4. All the villages are focusing on the elder people and their health care some changes are there might be changes for betterment

ISSN No. 2454-6194 | DOI: 10.51584/IJRIAS |Volume X Issue IX September 2025

CONCLUSION

Old Age Homes And Village Community Are All Dependend As In

- Families emotional displacement
- Variable quality
- Financial burden
- Cultural stigma
- Limited personalization
- No proper inclusion

Communities oriented old age homes strives to give proper care and facilities which are important for the social structure as a whole, but the support, connection and the interaction with different people make things easy. Also as per the ratio and study there is no segregation or any efforts on people suffering with various conditions, viz., mentally depressed, anxiety, confined in small space, zero feeling of independence or happiness due to lack of open surroundings and amenities and less than minimum standards of per square feet area required etc.

Old people`s basic needs not only include proper care not of health but also they need free and ample space to work and spend their time and a design that provides the openness to do whatever they want without any disturbance.

Study and analysis resulted in striking reports which says that the ratio of working senior citizens above the age of 50 is more than the second citizens and they are satisfied that they are the part of things without having to be dependent on others.

Happiness of senior citizens often increases by interaction with younger generations like tech-savviness and doing cool and engaging things with children that gives them healthier care, higher psychological support, inner self without any other. This concept plays important role as it provides mental health to these senior citizens which is 60% major problem in old age homes i.e. the psychological impact is greater than the physical problems.

There is a major stigma related to senior citizens who are not living with their families, making their and the families name disgraced. There shouldn't be much fuss about senior citizens working and living their life with dignity and independence. This Concept of `Self sustained community` supports and promoted this idea.

REFRENCES

1. Akbar, S., Tiwari, S. C., Tripathi, R. K., Kumar, A., & Pandey, N. M. (2014). Reasons for living of elderly in old age homes: An exploratory study. The International Journal of Indian Psychology, 2(1), 55–61.
2. Benny Kuriakose And Aneeta Cici George Design For The Elderly
3. By shantanu The Goodfellows: https://www.thegoodfellows.in/about bridging the loneliness gap for India's elderly
4. Denise Tanner Sustaining: The Self In Later Life: Supporting Older People in the Community Published Online By Cambridge University Press: 28 November 2001
5. International Journal of Industrial Ergonomics, Volume 80, November 2020, 103037
6. Job Satisfaction Gap Widens Between Younger & Older Workers Latest Press Release Updated: 2025-06-11
7. Kiran Thampi , Lija Mary Mathew Aging In Place For Community-Dwelling Older Adults In India: A Qualitative Exploration Of Prospects And Challenges
8. Leng Thang, Yoshimichi Yui ,Yoshiki Wakabayashi , Hitoshi Miyazawa :Author Links Open Overlay Panel
9. Meenakshi dawar Why Old Age Homes Rising In India: Identifying The Shift/ APRIL 17, 2025 /Knowledge Base

10. Prasita Nair, Head of Clinical Operations: Challenges Faced by Senior Citizens in India While Living Alone
11. Praveen Pai Focal Point for WHO Global Network for Age-Friendly Cities and Communities (WHO-GNAFCC) in Kochi, Center of Excellence for Developing Age-Friendly Communities (CEDAC) Kochi: A Model for Age-Friendly Urban Development in India https://doi.org/10.26419/int.00368.019
12. Promoting Age-Friendly Community of Support and Care in Japan's Aging Neighborhood: The Nagayama Model
13. Rajit MehtaJuly 22, 2025 why India needs senior care communities now more than ever
14. Ranga Raj Dhungana, Biraj Dhungana and Barsha Subedi: Acta Scientific Neurology (ISSN: 2582-1121) V Self-Sustaining the Livelihood of Senior Citizens by Providing Mental Support
15. Social Exclusion of the Elderly in India Chapter First Online: 08 May 2022 pp 231–251
16. SP 7 : 2016 National Building Code of India 2016 (NBC 2016)
17. Subhojit Dey, Devaki Nambiar, J. K. Lakshmi, Kabir Sheikh, and K. Srinath Reddy. Health of the Elderly in India: Challenges of Access and Affordability
18. Sugamo: A Friendly Community for Japan’s Elderly by Maria Pilar M. Lorenzo
19. Sunita Menezes Tissy Mariam University Of Kerala Status Of The Elderly And Emergence Of Old Age Homes In India
20. Tata trust report on old age facilities in India https://www.tatatrusts.org/upload/pdf/report-on-old-age-facilities-in-india.pdf
21. Tulika Tripathi :Policy Shortfalls Leave India's Elderly to Fend for Themselves [HTML version Mar 07, 2022 17:42 IST Updated: Mar 21, 2023 14:33 IST
22. Wong Leong Yee Tamkang University :Self-Sustainable Elderly Care Architectural Planning Model For Rural Community -A Case Study Of Sanzhi District

BIOGRAPHICS

KHUSHI AGRAWAL

Student of Dayanand College of Architecture Latur, Maharashtra, India

AR. PAYAL MUSMADE

Architect and Ass. Professor