

## A Study on Challenges in Implementation of Indian Accounting Standards among Indian Small and Medium Enterprises (SMEs)

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### ABSTRACT

In the fields of social welfare and healthcare, India's fast growing senior population offers both opportunities and challenges. Giving older individuals access to assistive technology has become a vital tactic for improving their quality of life, encouraging independence, and guaranteeing their active engagement in society. With an emphasis on the function of assistive technology including mobility aids, hearing aids, visual aids, and smart health monitoring systems, this research examines the Indian viewpoint on elder empowerment. It looks at these devices' price, accessibility, and cultural acceptability in various Indian contexts, taking socioeconomic inequality and rural-urban divides into account. The study also examines the contributions of non-governmental organizations (NGOs), government programs, and the commercial sector in expanding access to assistive devices. Issues including stigma, low awareness, and poor infrastructure are examined, and suggestions for community-based interventions, legislation changes, and technology advancements specifically suited to the senior population in India are made. In order to create an inclusive environment for India's ageing population, this study emphasizes the significance of a comprehensive strategy that incorporates technological, social, and policy-driven solutions. Determining the current use of Assistive devices requires first assessing the prevalence of Assistive Devices among the elderly. Furthermore, to comprehend the unmet need for elderly Assistive Devices, it is essential to ascertain the percentage of the elderly who require suitable Assistive Devices but are unable to obtain or utilize them.

**Keywords:** Assistive Technology, Assistive Devices, Person with Disability, Equity, Inclusivity.

### Introduction

Assistive Technology maintains or improves an individual's functioning and independence to facilitate participation and to enhance overall well-being. Many persons with disabilities and elderly population rely on AT services to carry out their daily activities. Assistive Technology has huge potential for reducing difficulties faced by persons with disabilities (PWDs) and elderly population in their day to day lives (Karki et al., 2023). Considering that persons with disabilities and elderly population should have the opportunity to be actively involved in decision-making processes about policies and programs, including those directly concerning them.(Convention on the Rights of Persons with Disabilities | OHCHR, n.d.)

Every person including the disabled has his life and liberty guaranteed under Article 21 of the Constitution. There can be no traffic in human beings (including the disabled), and beggar and other forms of forced labor is prohibited and the same is made punishable in accordance with law (Article 23).(Legal Rights of the Disabled in India | Education, n.d.).

Persons with disabilities (PwDs), older people, and individuals with chronic health conditions require assistive products to improve compromised physical function in performing routine living activities. Among people needing AT, PwDs are the largest groups who require assistive products the most. (Senjam & Mannan, 2023). One of the intriguing aspects of recent decline in elderly disability is the increased use of disability related equipment or assistive devices. Devices and other environmental accommodations may enhance the ability of the elderly person to accomplish a task, for example, a walker or cane to assist in moving around the home, or may reduce the physical requirements of the task, for example, adding environmental features such as railings or grab bars or moving to a more accommodative setting. Assistive devices (ADs) can help individuals with disabilities compensate for lost functions, increase their independence, develop their potential, and thus enhance their quality of life. (Pal, 2021).

### **India and the Rights for Older People**

In India the older persons or senior citizens are protected under Article 42 in Part IV (directive principles of state policy and Article 21 of the constitution of India.

#### **Article 41: - Right to work, to education and public assistance in certain cases**

“The state shall within the limits of its economic capacity and development, make effective provisions for securing the right to work, to education and to public assistance in cases of unemployment, old age, sickness and disablement, and in other cases of undeserved want”.

It is important to understand and gain an insight into the activities of older people and to investigate activities they are engaged in throughout their everyday living. It is believed that for older people to continue living safely in the community, they need to be independent in personal and instrumental activities of daily living like bathing, cleaning, walking etc. Use of assistive technology improves the mobility, reduces the disability and also decreases the burden of care providers. The elderly using assistive devices have improved confidence and feeling of safety which result in increased activity level and independence. (Pal, 2021)

By enabling the elderly and people with disabilities to carry out basic everyday tasks like bathing, climbing stairs, taking medications, and dressing, assistive and enabling technology improves their quality of life. Increased mobility enhances physical, mental, and emotional health and quality of life. It also strengthens bones and muscles and may help persons with chronic illnesses avoid a quick decline in health. The use of assistive technologies can help persons with disabilities or the elderly preserve their freedom, quality of life, and ability to pursue their vocations. The concept of “active and successful aging”, which describes a state in which an elderly person can stay healthy and active, is one that assistive technology promise and support. However, not all older adults have access to the devices they need to improve their quality of life. (Prajapati & Sharmila, 2023).

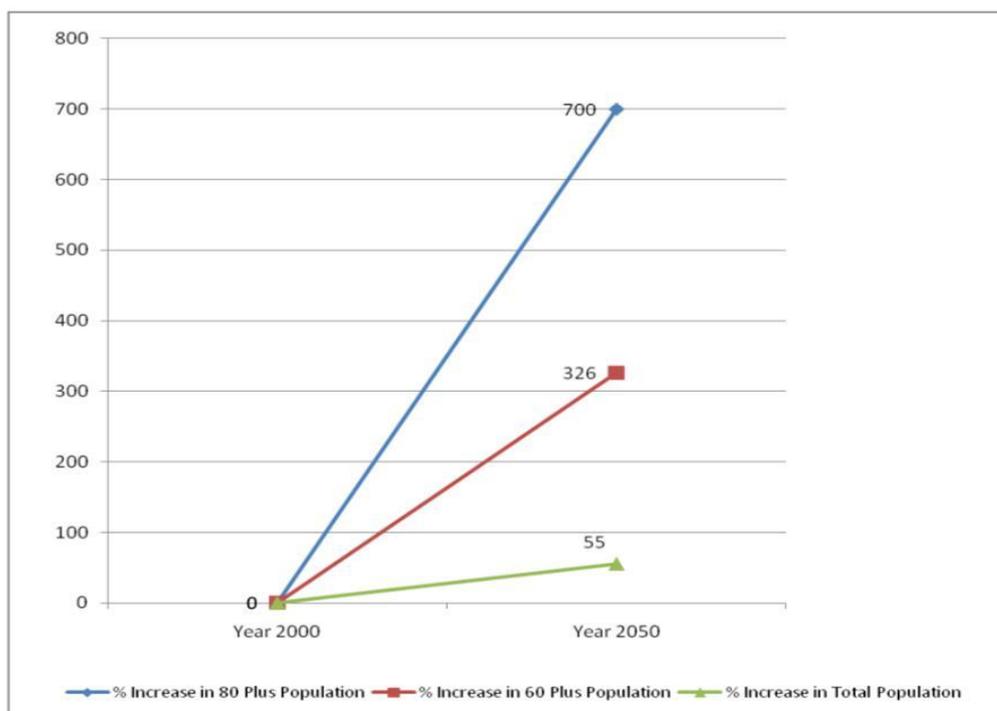
In 1991, the general assembly adopted the United Nations Principles for older persons which aims to ensure that prioritized attention is given to the needs and problem faced by the older population. It encourages countries to incorporate the certain principles into their national policies whenever possible this present paper showcases the needs, access, and challenges in Assistive devices services, follow up and policies running for the provisions of assistive devices to senior citizen in India. Followed by the exploration of different initiatives and potential solutions for the possible growing demand for AT services in India.

### **Background and Rationale**

The National Policy of Senior Citizens 2011 Demography of Indian Ageing The large increase in human life expectancy over the years has resulted not only in a very substantial increase in the number of older persons but in a major shift in the age groups of 80 and above The demographic profile depicts that in the years 2000-2050, the overall population in India will grow by 55% whereas population of National Policy on Senior Citizens 2011, people in their 60 years and. above will increase by 326% and those in the age group of 80+ by 700% - the fastest growing group.

Years	Total Population (millions)	60+ (millions)	80+ (millions)
2000	1008	76	6
2050	1572	324	48

Source: World population Ageing: 1950-2050; Department of Economic and Social affairs, Population Division, United Nations. New York.2002



1/8th of the Worlds Elderly Population lives in India. Most of them will never retire in the usual sense of the term and will continue to work as long as physically possible. Inevitably though the disability to produce and earn will decline with age. The absence on savings will result in sharp declining in living standards that for many can mean destitution. Therefore, this is the challenge of old age income security in India. As a result of the current ageing scenario, there is a need for all aspects of care for the Oldest Old (80+ years) namely, socio economic, financial, health and shelter. National Policy on Senior Citizens 2011. Problems in any of these areas have an impact on the quality of life in old age and healthcare when it is needed. Increase in life span also results in chronic functional disabilities creating a need for assistance required by the Oldest Old to manage simple chores. This policy looks at the increasing longevity of people and lack of care giving.(Mitra, 2011).

The 2011 census shows that the elderly population (60 Years and above) of India comprises of 103.8 million people. The proportion of elderly population has been on a rise and as per the SRS (sample registration system) statistical report 2017 issued by the registrar general & census commissioner, Ministry of Home Affairs, Government of India, the percentage of elderly population (60 years and above) has increased from 5.3 percent in 1971 to 8.2 percent in 2017.

The increasing number of older persons in India's population is mainly due to the general improvement in the health care facilities over the years. The major challenge is to ensure that the elderly persons do not merely live longer, but also lead a secure, dignified and productive life. (Mitra, 2011).

#### **National Policy on Senior Citizen 2011**

The "National Policy for Senior Citizens 2011" is a new version of a policy that is founded on the basis of various aspects. These include the escalating in the number of elderly people, the drastic shift in

social and economic landscape, the development of science, technology, and medical research, as well as the high rates of poverty among the elderly in rural areas (51 million elderly people live below the poverty line). Elderly women are more likely than males to be dependent on their offspring and to feel lonely. Elderly people are impacted by social exclusion and impoverishment, health care privatization, and shifting patterns of illness. Everyone over 60 is considered a senior citizen. The specific needs of the "oldest old," older women, and elderly adults living in both urban and rural regions are all covered by this strategy.

### **Policies, Programmes and Schemes for the Welfare of Senior Citizens/Older People**

The National Policy on senior citizen adapted by the government of India to make senior citizens to live solemnly. The ministry of social justice and empowerment is nodal ministry in implementing the NPOP. There are around 19 ministries which are involved in implementing the various components of NPOP.

#### **Ministry of Social Justice and Empowerment**

The policy anticipate the state support to assure them with financial, food security, healthcare, shelter and necessities of senior citizen and getting proper distribution in development, protection against the violence and access and availability of the services to enhance their quality of life.

- **Indira Gandhi National Old Age Pension Scheme**

- Old age pension scheme would cover all senior citizens living below the poverty line.
- Rate of monthly pension would be raised to Rs.1000 per month per person and revised at intervals to prevent its deflation due to higher cost of purchasing.

The "oldest old" would be covered under Indira Gandhi National Old Age Pension Scheme (IGNOAPS). They would be provided additional pension in case of disability, loss of adult children and concomitant responsibility for grandchildren and women. This would be reviewed every five years.

Healthcare needs should be prioritized for senior citizens. The intent should be to provide with the high quality, affordable and accessible healthcare services public health services, health insurance, health services from non-governmental organizations and private medical care would all be meticulously balanced.

- **Integrated program for senior citizens (IPSRc):** a Central scheme to improve the quality of life of the senior citizens. Initially it is known as integrated program for older persons revised In April 2018. It includes the maintenance of different project,

- Sansad Adarsh gram yojana: - to provide food, healthcare, shelter for 25 destitute of senior citizens or for 50 female senior citizens respectively.
- Continuous care homes and homes for senior citizens diagnosed with alzheimer's disease/ Dementia.
- Mobile Medicare units: providing medical care services to rural areas senior citizens.
- Physiotherapy clinics for senior citizens.

Regional resource and training centers (RRTCs) Broad activities include monitoring and providing technical support, advocacy and networking, training support, advocacy and capacity building program.

- **The scheme of National Awards for senior Citizens- Vayoshreshtha Samman**

- Senior citizens and excellent performing institutions or organizations will be felicitated by the national award.

- **National Council of senior citizens NCSRC in 2012-** it was advised to focus on the welfare and enhancing their quality of life.

- **Rashtriya vayoshri Yojana (RVY)-** It was announced in 2015-16. Scheme to provide the assistive devices in free of cost to below poverty line category senior citizens and suffering from any age related disabilities.

- **Senior citizens Welfare fund-** it was initiated in March 2016. This fund is utilized for their health care, food, welfare of elderly widows, and old age homes etc.

### **Benefits Extended By Various Other Central Ministries For The Welfare Of Senior Citizens/ Elderly Population**

In response to these trends, the Rashtriya Vayoshri Yojana (RVY) was launched by the Government of India on April 1, 2017. Targeting senior citizens from Below Poverty Line (BPL) households suffering from age-related disabilities, RVY aims to improve their quality of life by providing physical aids and assisted-living devices fully funded by the Central Government. This initiative reflects a commitment to address the challenges faced by India's aging population, emphasizing quality, diversity of needs, empowerment, extensive coverage, and post-distribution support to ensure the effectiveness of the aid provided. As projections show a significant rise in the elderly population and their needs, RVY's comprehensive approach seeks to cater to their diverse conditions, aiming for an inclusive support system that enhances their independence and societal participation. (Inception Report 1 | Page Evaluation of Rashtriya Vayoshri Yojana EVALUATION REPORT Ministry of Social Justice & Empowerment, n.d.)

### Implementation Mechanism

At the apex, the Ministry of Social Justice and Empowerment (MoSJ&E) provides overarching guidance, financial resources, and policy direction, while technical support comes from ALIMCO, which sets device specifications and oversees quality. ALIMCO then organizes camps in phases—assessment, distribution, and post-distribution—to ensure the aids reach the intended recipients effectively and efficiently. The state-level responsibilities are managed by the Social Welfare Department, identifying beneficiaries with a focus on rural and backward areas, and prioritizing those in shelter homes. (Inception Report 1 | Page Evaluation of Rashtriya Vayoshri Yojana EVALUATION REPORT Ministry of Social Justice & Empowerment, n.d.)

Year	Budget
2017-18	1.5cr
2018-19	106.51cr
2019-20	88.38 cr
2020-21	26.50 cr

There was a notable absence of budget in 2019-20, but subsequent years saw consistent funding. The scheme's primary purpose is to provide physical aids and assistive living devices to senior citizens, particularly those belonging to the Below Poverty Line (BPL) category.

State-wise data highlights an impressive coverage of 315,257 beneficiaries, with a gender disparity favoring males (58%) over females (42%). This distribution suggests a need for better access for female beneficiaries, despite surpassing the minimum objective for female inclusion.

### Types of Devices

The Scheme proposes to provide the following Aids and Assisted Living Devices to eligible elderly beneficiaries, depending upon their physical impairment: -

- Walking sticks
- Elbow crutches
- Walkers / Crutches
- Tripods / Quadpods
- Hearing Aids
- Wheelchair
- Artificial Dentures
- Spectacles

The Scheme will be fully financed (100% funded) by the Central Government from 'Senior Citizens Welfare Fund'.

### Discussion

Awareness, coordination refinement of beneficiary identification and distribution processes needs to be scale up more nationally. Crucially need to address these challenges for expanding the impact and providing the equitable support to the India's aging population. It has been seen women has higher representation in states like Puducherry and Meghalaya and lower figure representation in states like Bihar and Uttar Pradesh because of the influenced challenges like awareness level, social norms and accessibility level. Outreach and sensitization campaigns are the necessity to dismantle barriers and foster the inclusive environment so that elderly women can also be benefitted by these schemes and programs. While these schemes broad reach and positive impact on independence and social

interactions are commendable, the feedback on aid quality and effectiveness reveals areas for improvement. The voices of beneficiaries experiencing difficulties with the aids or those citing a need for advanced mobility solutions like battery-operated wheelchairs highlight the importance of continual assessment and adaptation. Addressing these challenges requires not just a feedback mechanism but a responsive system ready to evolve and incorporate technological advancements that can significantly enhance the beneficiaries' independence and quality of life. (Inception Report 1 | Page Evaluation of Rashtriya Vayoshri Yojana EVALUATION REPORT Ministry of Social Justice & Empowerment, n.d.). The implementation timeline, from planning to execution, showcases a well-structured approach involving multiple stakeholders. This methodical process ensures thorough preparation and effective delivery of the scheme's benefits. However, the formation of district-level committees, as recommended, has been inconsistent, suggesting a gap between guideline and practice. Addressing this gap could streamline the beneficiary selection process and enhance scheme monitoring.

Groups advise broadening communication channels and alternating their distribution strategies which includes local area health clinics and service delivery system. More workshops need to be conducted for the district social welfare officers and at village level settings.

### **Conclusion**

Lack of awareness stems from insufficient information dissemination and engagement strategies, which fail to effectively communicate the scheme's purpose and benefits.

It is actively recommended to engage with a multichannel communication plan which incorporates social media, local media, deeply community engagement and collaborative approach with regional NGOs and health professionals to bridge this gap it will be beneficial for those who are living in rural areas. Other distribution channels should be used by the plan to improve accessibility. Techniques include establishing home-based delivery and collaborating with basic healthcare facilities for local distribution could greatly increase the scheme's reach. In addition to serving people with significant mobility impairments, these options would guarantee that no older citizen who qualifies is turned away because of transportation or geographic constraints.

Involving local leaders and community organizations in the promotion of the program and holding frequent assessment camps at the village level could significantly boost community involvement. The plan can be better adapted to local requirements and preferences by utilizing the networks and influence of local leaders, which will increase its impact and visibility. In addition to facilitating easier implementations and higher beneficiary satisfaction, this kind of localized engagement would increase a sense of ownership and trust in the program.

Assistive device distribution delays from the point of recipient identification to the actual delivery might seriously impair the Rashtriya Vayoshri Yojana's ability to provide aid on time. The administrative procedures' bureaucratic obstacles frequently cause these delays. Beneficiaries may depend on these aids for everyday activities and basic mobility, so extended wait times may worsen their health and quality of life. In addition to discouraging potential beneficiaries from joining, such delays may damage confidence in the scheme's efficacy.

As part of the distribution process, it is imperative to provide thorough training sessions for beneficiaries. The entire range of equipment maintenance, operation, and safety should be covered in this training. By offering these guidelines in the form of interactive video tutorials and user-friendly manuals that beneficiaries can view directly on their mobile devices, the program can make sure that seniors are not only open to using the aids but also fully prepared to do so in a safe and efficient manner.

The older population's quality of life would be greatly enhanced by the Rashtriya Vayoshri Yojana by implementing these improvements. In addition to fulfilling a specific need, each new addition would blend in perfectly to offer a comprehensive support system that upholds the dignity and increases the freedom of each senior it serves.

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