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Life is like that!

M.V. Ruparelia • Mira Road (E)

Life is like 'this' or 'that' but what is Life itself? Life is a continuous series of experiences, each one of us get from childhood onwards. Every one's experience is different and as such Life is like 'this' to some and like 'that' to others! The experience of children of the same parents staying at the same place, in the same family, same locality, same country is different. Every one on earth has different experience and is therefore unique. The type of experience one gets determines the nature of his life. The atmosphere, environment, happenings etc differ from time to time and place to place and as such every one gets different experience and based on these experiences behaves differently and indifferently! Same person does not behave similarly at all times! It is your World! It is as you see & perceive. You see it differently at different times! "Tunde Tunde Matirbhinna" Every one thinks & behaves differently.

We all human beings have similar physical bodies made of five elements, having five organs of perception (eyes, ears, nose, tongue, skin) and five organs of action (hands, feet, speech, genital organ and the organ of evacuation). Each individual, however, looks at Life differently as per experiences, he gets. The same World provides different and distinct visions to different people depending on how his mind &

intellect projects them as per their past experiences.

The goal of Life is absolute happiness. Many believe that happiness lies in sense objects and they strive to acquire as much as possible wealth to get all luxuries of life! Their aim is to enjoy 3 Ws-Wealth, Wine & Women. To-day, Science & Prosperity have brought so many luxuries in human life that there is nothing, which is not available by spending money! Best of the foods, fruits, clothes, shelters, facilities of transport, communication etc etc are available in plenty. Society has become very free in all respect due to liberal & free thinking in name of Human Rights, Women Lib, World Culture etc. and many people forget their original culture and live as they like without even bare necessary restrictions required for smooth functioning of a Society. Money earning is the only goal and money is otherwise also available easily & in plenty through various loans and hence many live life that way! Some believe that happiness lies in achieving/realizing God! Such people live modest and high moral life and look after their family, society & country by doing social/ religious service, giving donations, creating Trusts for help to needy etc. Some build temples, mosques, churches etc. also for benefit of

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DECEMBER 2008



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Starting Help-lines and Counselling Centres

Editorial...

The Central and State Governments have various Schemes providing facilities and concessions for Senior Citizens in the country. It is observed that due to lack of information, many of these facilities are poorly utilised. An important activity of our Senior Citizens Associations all over the country should be to spread this information regarding all available facilities & benefits through their meetings, periodicals etc to the Senior Citizens, along with the procedures to get them. 11% of our Senior Citizens are lonely. They feel worried and anxious and need psychological support off &

on. Many have family conflicts & intergenerational problems and are in search of solutions. Some need help for expeditions disposal of their

pending court cases. Some want more information abour Right to Information Act, Maintenance & Welfare of Parents and Senior Citizens Act etc. to get their problems solved. It is the duty of our Senior Citizens Associations to help all such needy Senior Citizens and support them. This can be done by starting Helplines and counselling Centres by every Senior Citizens Associations.

Some of our Associations are having Helplines but we feel that it must be the activity of each and every Association. Through the Helpline and Counselling Centre you become a direct service provider to needy Senior Citizens. Our Services should be open to all 55+ Senior Citizens and their Caregivers. In USA and Singapore these services are provided to all 50+ person. For starting a Help-line you need just one room and for the Counselling Centre you need at least two specious rooms. If you approach your local Municipal Corporation / State Govt. office, you can get two rooms free for your Associations activities, which will include the Help-line & Counselling Centre. It is a group activity, hence you must have at least five volunteers who will devote their time for this work. The volunteers will need training in counselling in local, Hindi and English languages by a psychiatrist professional. Telephone is most important and you can get a free telephone line for this social work. You will have to make publicity of the Help-line and Counselling Centre through media, handbills etc.

For Help-line, you need to have full information on (1) the facilities and concessions available from Central and State Govts. to Senior Citizens like - Indira Gandhi National Old Age Pension Scheme, Annapurna &

Antyodaya Scheme, Health Services available-free and subsidised, Health Insurance Schemes, Tax benefits, travel concessions etc. (2)

Old Age Homes- free and paid, Day Care Centres in the State, (3) Legal Rights of Senior Citizens, various Acts concerning the Senior Citizens including the MWPSC Act, RTI Act, CPA etc., (4) Expeditious disposal of court cases of Senior Citizens, (5) Identity Cards for Senior Citizens, (6) NPOP, State Policies on Senior Citizens, important GRs for Senior Citizens etc. (7) Integrated Programme for Older Persons (16 schemes some of which can be undertaken by Registered Senior Citizens Associations).

To the lonely and helpless the Help-line is almost a life-line as it provides a much needed link with a human voice and a sympathetic listening ear. Many may call just to talk and vent their feelings. Here the Help-line turns into telephone counsellings. Few may need face-to-face discussion with a professional Psychiatrist.

The Union Ministry of Social Justice & Empowerment has a scheme of financial grant upto Rs.4092 lakh annually for the Help-line & Counselling Centre Project of any Registered Senior Citizens Association with a two years standing. (10% of the cost is to be borne by the Association) The administrative expenditure of

Cont. on Pg.6

Life is like that! Cont. from pg. 1

people. Many of the lower Middle class & poor pass their life continuing to struggle for livelihood. Some are happy-go-lucky, some sober, some extrovert, some introvert-varieties of human beings! This is the outer portion of life.

Inner portion of life is-Living in the Present and enjoying every moment of life!. Unfortunately for the Human Race, which is the only Creation having intelligence & discriminating power, most of us do not live Life at all! Even while at leisure, while going for morning or evening walk, many neither enjoy walking nor nature around them! We do not look at vast sky before us nor greenery around us, even while walking in gardens! We see few steps ahead and that too mechanically and remain busy (!) in our thinking of the past or the future! Even while doing Yoga or Meditation, many hardly get involved in what they are doing but remain busy in thinking!! While eating, many watch TV and do not enjoy eating. While watching TV also, we go on thinking & thinking! Is there any moment, when we are with ourselves and not thinking! Thoughts have no value till they are accepted & acted upon, then why do we waste our Life in remaining busy in thinking instead of remaining with ourselves and enjoy each moment of our Life? Life is really beautiful! Let us strive to live in Present, as what we do

Editorial... (Cont. from pg. 5)

electricity, telephone, stationary, publicity, conveyance, books etc. and the non-recurring expenses on furnitures, telephone etc. at the time of setting up of the Project (upto Rs.80,000/-) will also be paid by the Govt.

You may make all necessary provisions and apply to MSJE through your State Govt. for the Govt. grant. That is your choice. But you should surely start the Help-line at least, immediately, which needs little finance.

-Dr. S.P. Kinjawadekar

in the present shall be our Future! For our Future Happy Life, we must live our present Life peacefully & usefully-peacefully by controlling our thinking & usefully by serving our fellowmen.

On the other hand, we do not think, when necessary! We act without thinking most of the time. Many are hypocrites and speak one thing, do another thing at every stage, without thinking and realizing as to what they are doing. We tell our children to do what we tell them and not to do what we do. We react immediately for anything & every thing instead of acting after proper thinking and decision. We criticize others without much thinking and consideration. Just as Camel having all the 18 limbs twisted/crooked but criticizing every animal having only 1 or 2 limbs twisted, we go on criticizing others! We oppose for sake of opposing without thinking properly. We follow many things blindly without thinking properly. We act without proper thinking most of the times as per our own Pride & Prejudices, unfounded beliefs, mental blocks etc.

According to Scriptures, the quality of THOUGHTS can be changed by following the path of Devotion (Bhakti), the quantity by pursuing the path of Dedicated Action (Karma Yoga) and direction by pursuit of knowledge (Gyan Yoga). All the three are to be followed sincerely.

In Life, What is Right? What is Wrong? Nothing is Right, nothing is Wrong! It is our perception based on accepted experiences that makes things/matters Right or Wrong! In view of this position, one must live Life King Size, peacefully, pleasantly and usefully. Let others also live according to their own perceptions without creating unpleasant atmosphere around by reacting, blaming, criticizing, opposing etc! You are Your God! You are Your World! You are Your Life!! One should do good to others and raise oneself so lofty that even God may peep in from sky and ask thee thy motive!

Yoga destroys all pain of one in regular in his eating habits, moderate in amusement and regular in his work and acts, regular in sleeping and keeping awake.

Herebefore, Lord has told what not to do when practising yoga. Now he tells what to do.

One who is moderate in his habits about eating and amusement, regular in performance of his work, and sleeps or keeps awake at proper times, attains yoga. This leaves no grief in his life. He is freed from all types of anxieties, worries and ailments.

In all our daily activities of life, like getting up, resting, moving about and sleeping and keeping awake, there must be a fixed regularity and volume of proportion. Limitless conduct ends in grief. Yoga means 'equality' (...). Proportionate conduct and avoidance of extremity reveals and balanced nature of mmind. In every activity of life such tone and tune needs to be maintained. This is practising yoga. This is the beginning of yoga practise. The work is done only by doing.

The auspicious needs no waiting.

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आत्मोपम्येन सर्वत्र समं पश्यति योऽर्जन। सुखं वा यदि वा दु:खं स योगी परमो मत:।।

O Arjun, one who looks at the pleasures and griefs of others as his own, should be regarded as the perfect yogi.

Lord describes here the yogi who has reached the highetst stage of perfection. When the process of yoga is started by controling senses, the seeker gains equal vision. Equality is the core of yoga. His mind gets rid of ego and affection, and no feeling of 'me' and 'mine' is left behind. The discrimination between high and low vanishes and he behaves with every one with the conviction, 'whatever meets him is God in different form'. Also, he learns to realize what he would have done, had he been in the place of the other. His behaviour with the other is the same as with himself.

Others, too, have pleasurers and griefs like ourselves. They also have to face the duos of success and failure, anger and peace, and others. We have faced them. How can we forget our own experience? When this awareness dawns on us, the sense of 'self and the other' is shed like a leaf. Unity appears and equality is created. This is the real vision of equality.

The society scooped by the feeling of diversity can by the study of the Geeta reestablish the value of equality. When the insight of viewing God in everything develops where will be inequality and the discrimination arising from it? The Geeta does not consider the liberation of the individual alone but of the society and social life too. How microscopic it is in its thoughts, is seen here.

One is reminded here of the devotional song of Narsi Mehta - वैष्णव जन तो तेणे कहिए जे पीड पराई जाणे रे।

'Know them as God's men who are conscientiously aware of others' grief.

Courtesy: Shri V.V. Chiplunkar Aurangabad.

Hope for Visually Challenged

Will blind people be able to see again. The buzz is that the London Scientist have devised a state of art device, which converts images into sound and allows them to visualise the objects ahead. In an experiement conducted on blind volunteers, the researchers concluded that the volunteers with the help of the device are able to visualise objects placed in front them using part of the brain, which in sighted people are used for receiving information from the eyes. In fact the brain responded as if they were really seeing the object. Interestingly the development raises the prospect of allowing blind patients to navigate their way around a room and regain their ability to get a picture of the world around them. Besides the system involves changing the blind people how to associate a series of sound with different shape.

-News

GOVERNMENT OF ASSAM

OFFICE OF THE DEPUTY COMMISSIONER KARIMGUNJ (MAGISTRACY BRANCH)

NOTIFICATION

In superseding this office earlier noification issued vide memo No. KMJ.70/2004/57-A, dated 04.11.2006, the District Level Cell for Senior Citizens to hereby reconstituted with the following members to co-ordinate the various aspects concerning the Senior Citizens of the District with immediate effect.

1.	Dr. B. Sarma, Deputy Commissioner, Karimgunj /	- Chairman				
	Shri S.Z. Hazarika, Addl. Deputy Commissioner, (Dev.) Karimgunj					
2.	Shri A. Choudhary, Dist. Information & Public Relation Officer, Karimgunj	- Member				
3.	Shri K. Dutta Choudhary, Retd. ACS, Royanagar, Karimgunj	- Member				
4.	Shri B.G. Bhattacharyajee, Retd. ACS, Settlement Road, Karimgunj	- Member				
5.	Shri Brojendra Deb, Advocate, Karimgunj	- Member				
6.	Shri Manish Das, Retd. Labour Commissioner, Assam,					
	Settlement Road, Karimgunj	- Member				
7.	Smt. Anima Kar, Ukil Para, Karimgunj	- Member				
8.	Shri B.B. Sarmacharjee (Secretary, S.C.C.), Subashnagar, Karimgunj	- Member				
9.	Shri Nirmalendu Das, L.B. Road, Karimgunj	- Member				
10.	Shri Mohitosh Das, Tarabhushan Lane, Karimgunj	- Member				
11.	Dr. Kamal Uddin Ahmed, Kanishail	- Member				
т	The Committee / All will sit himonthly to sort - out the various issues concerning the Senio					

The Committee / All will sit bimonthly to sort - out the various issues concerning the Senior Citizens of the District.

**Deputy Commissioner*, Karimgunj*

सामाजिक न्याय विभाग (मध्यप्रदेश राजपत्र)

मंत्रालय, वल्लभ भवन, भोपाल.

भोपाल, दिनांक २२ अगस्त २००८

क्र. एफ. ३-७४-२००८- छब्बीस - २- माता-पिता और विरष्ठ नागरिकों का भरणपोषण तथा कल्याण अधिनियम २००७ (२००७ का ५६) की धारा १ की उपधारा (३) द्वारा प्रदत्त शक्तियों को प्रयोग में लाते हुए, राज्य सरकार, एतद्द्वारा २३ अगस्त, २००८ को उस तारीख से रूप में नियत करती है जिस तारीख को उक्त अधिनियम प्रवृत्त होगा।

मध्यप्रदेश के राज्यपाल के नाम से तथा आदेशानुसार,

ललित दाहिमा, उपसचिव

Concessions for Senior Citizens

1) To, Date: 19-7-2008

The Secretary,

The Indian Medical Association,

I.M.A. House, 16, K. Khadye Marg, Mumbai-400 034.

2) The Secretary,

Gen. Practitioners Association,

17, Mantri Corner, Gokhale Road, Mumbai-400 015.

3) The Association of Medical Association

4, Ganapati Niwas, Police Line, Opp. Andheri Stn., Mumbai-400 059.

Dear Dr.

Sub: Helping Elders.

According to Government of India's Policy on Older Persons, 1999, Senior Citizens are given various financial concessions in Railways, Air Travel, Buses, Medical, Income Tax etc. All government & municipal hospitals, Private hospitals like Jaslok, Harkissondas etc are giving some concessions to Senior Citizens. Many Senior Citizens in Our Country are poor, having no/insufficient income. Income of other Senior Citizens also has decreased due to less interest rates & inflation. As life span of Senior Citizens is increasing day by day, they have to maintain this longer life span with the help of Doctors & Medicine with less income and more necessity of treatment due to natural ageing process beyond their control. Senior Citizens have done a lot for the Society in their Prime Time and the Society may now consider sympathetically the ways and means to respect and do at least something for them so that they can pass their last spell of life happily, peacefully and usefully. Justice C.S.Dharmadhikari has observed that facilities provided to aged are not by way of charity or bounty but is remuneration for their past service (to the Society). As Senior Citizens need more Medicare & Medicines due to various diseases due to ageing, we request you to consider the following:-

- i) Sympathetic consideration by giving 50% concession in day to day charges for examination/ visits for minor/major ailments by general practitioners.
- ii) Adoption of 1 or 2 couples or 4 to 5 Senior Citizens as God Father/Mother for regular checkups and providing free medicines, vitamins, dietary supplements etc, as necessary to those, who can not afford medical expenses.
- iii) Let Specialists/Consultants keep 2 or 3 hours a week for free examination/advice for all Senior Citizens or at least give 50% concession.
- iv) Pathological Doctors may also keep 2 or 3 hours a week for free examination for all Senior Citizens or at least give 50% concession.
 - v) Any other measures, you can think over and give to your Elders.

We shall be obliged, if our request is considered favorably and your members are advised to give such concessions to Senior Citizens. Incidentally, National Society for Prevention of Heart Diseases & Rehabilitation has standing instructions to its Member Doctors to give 50% concessions to Non-Doctor Members. This can be extended to all Elders.

Thanking You, Yours Sincerely, (M.V.Ruparelia)

(Above letters written by Shri M.V. Ruparelia 8, Mira Road, (E) to the Major Hospitals in Mumbai is also useful to those Readers / Associations near to the above Hospitals for a visit or write and pursue with concerned authorities for general good of all.

Those Readers / Associations, who desire to take similar action for their areas may write to the concerned authorities for the good of all in their area. -Mg. Editor)

Living with Daughters in old age

Dr. N.N. Sachdev, Indore

I cannot even forget Mr. Judd's remarks that "INDIANS ARE SENTIMENTAL DONKEYS". This remarks were made by him as back as fifty years and seem to hold even today. Mr. Judd was a high official with an international Oil Company at Karachi. Our family had buisness connection with this company. My father used to visit Karachi regularly for buisness promotion and I would accompany him occasionally in my boyhood. I recall that we invariably use to make courtesy call at Mr. Judd's residence and carried a basket of fruits called 'Dali' in local slang, Mr. Judd, a British had become very friendly with us. We were introduced to Mrs. Judd's parents, who I came to understand later on, were permanently living after their retirement with Mr. Judd. I had innocently enquired as to where the parents of Mr. Judd were living. His prompt reply was that they were in U.K. and were staving with one of his sisters.

Indian Traditions

As an Indian, I was naturally amazed, our orthodox culture of that time (even present also) prohibited not to accept any food or even favour from one's daughter's house. I told him of it and it prompted the remarks.

He explained that Mrs. Judd was the ladymanager of the establishment, although he was the master of house financially. Mrs. Judd understands the needs both physical & emotional of her parent better than Mr. Judd's parents. It brings harmony in the family and there are mutal arrangement viz: mature elderly advice on the spot, help in house keeping and child care, etc. This easily explains the normal practice of parents generally staying with or near their daughteres in West. They have popular jokes on mother-in-law and son-in-law relationship.

Sensible Arrangement

On a deeper contemplation, I agreed with him that, this arrangement is more practical and sensible. There is no scope for proverbial Indian mother-in-law, daughter-in-law rivalry. It must be realized that religious practices and sanctions were made in the context of the time. The joint family system was in a vogue, where more than three generations lived together in the same household. The daughter-in-law had no seperatestatus or identity. The relationship existed between two families and not merely between two persons i.e. husband and wife conditions have since changed, so should our outlook change. There are more nuclear families. The ladies are also working and earning members of the family. Married Daughters are given equal in parent's property under law, it is the son who feel aggrieved that daughter get equal share in property besides the dowery.

Longevity, urbanisation, development of nuclear families all are products of mordenization. Let us become emotionally modern and treat daughter and son equally.

Dignity of Woman

Once taboo of old parents living with daughters is removed, the gender discrimination prevailing at present will also vanish automatically, as is being propogated nationally to control population. This will restore the dignity of women. It is not always that old parents are financially dependent.

They may have independent income/assets. What they need more is the understanding and compassion, which a daughter can always give more than a daughter-in-law.

If one is not lucky to have a daughter, it is suggested that one may adopt a daughter or living with or near a sister can be a good alternative.

It may not palatable news for son-in-law and his parents, who may like to live with their daughter in changed conditions. But one has to pay the prize for the modernization to promote conjual bliss. Among educated and awakened classes in India, parents have already started living with or near their daughter, in case they have no male issues or the sons are living far away or abroad. This is better than living in OLD AGE HOME or alone in one's own house.

Prakash Javadekar

- Member of Parliament
- Spokesperson, BJP



Date: 18.11.08

Subject: Problems Being Faced by Senior Citizens in India

Respected Sir,

I am pained to bring to your kind notice the miserable plight of the senior citizens of the country who constitute a sizable proportion of our society. Many senior citizens suffer from mental and physical diseases and their welfare is being ignored in spite of the National Policy of Older Persons the implementation of which leaves much to be desired.

In this connection I may mention that no reply has been received to the letter written to you by the President, All India Senior Citizens' Confederation, Navi 'Mumbai vide his letter No. P/714-730/2008 dated 3rd May, 2008. (Copy attached).

The NPOP assures that "the development of health insurance will be given high priority to cater to the needs of different income segments of the population and have provision for varying contributions and benefits". Almost all insurance companies are chary of providing medinsurance to senior citizens. The K.S. Sastri Committee report which has recommended health insurance for senior citizens with pre existing deseases, without age bar and at affordable costs, needs to be implemented without further delay.

Further, the experience and expertise of senior citizens can be gainfully utilized by employing them in various projects viz. Adult Education, Environment, Aids etc. Most senior citizens will only be too happy to volunteer their services for these and other social causes.

Senior citizens today are a vulnerable lot especially in cities. Most children have settled abroad leaving their old parents to depend on others for their safety and security. The society needs to make a conscientious effort to make the twilight years of our senior citizens, who have contributed the best years of their lives for the well being of our country, as comfortable as possible.

In view of the above you are requested to intimate whether the Government has earmarked funds for the implementation of the National Policy of Older Persons, and if so, the amount so earmarked may please be intimated. It is also requested that All India Senior Citizens' Confederation, AISCCON, may be recognized as a National association of older Persons.

With regards,

(Prakash Javadekar)

C.C. to: Dr. S. P. Kinjawadekar, President, AISCCOM

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Family Health Issues

Dr. Harbans Juneja

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Mobility is a precious attribute of life asserted primarily by Nature's unique contraption, the bone. Bone is dynamic, the hardest and most durable of tissues in the body. It sustains mobility by repairing and renewing itself constantly. Two hundred and six district, diffrently shaped bones constitute the skeleton. The regidity of the skeleton provides mobility through transmission of forces which orginate while muscles contract.

Bone mass begins to form rapidly in the foetus and infant. Seventy-five to eighty-five percent of skeleton is made during adolescence. Women reach their peak bone mass by around age 25 to 30, while men build bone mass until age 30 to 35.

Theoretically, all individuals should again peak skeletal bone mass and density as determined predominantly by their genetic constitution. In practice however, poor and defective nutrition during the formative years, consumption of diet low in calcium and vitamin D, use of certain medications such as glucocorticoids / some anticonvulsants, an inactive life style or extended bed rest, smoking and alcoholism, prevent the maximal gain in the body skeletal bone mass.

After peak bone mass has been achieved, old bones can be prevented from breakage, may be replaced with new bone at the site of resorption but no de-novo formation of bone mass can ever take place.

It is therefore imperative that youths accrue healthy bone balance in their bone account during the period of bone formation. Healthy peak skeletal bone mass is a time tested shield against the pilfering effects of old age. Peak bone mass is a timely saving to meet expenditure in

bone adversity in old age. A change in life style can do wonders to retard/prevent osteoporosis.

The skeleton is like a retirement account for minerals. In this "skeletal" account bone can be deposited faster than its withdrawals only during the first three decades of our lives. After that, withdrawals are greater than deposits, and all we can endeavor is to minimize the net loss. Osteoporotic fractures are the sign of the bankruptcy that occurs when too little bone is formed during youth age, or too much is lost later, or both.

After age 30-45 bones are not formed at the same pace as it is broken down. The breakage or resorption of bone exceeds their formation. The imbalance in the bone resorption and bone formation begins at different ages at different skeletal sites in the skeleton. In women it is exaggerated after menopause when estrogen levels in the circulating blood are at their nadir. In men breakdown of bones exceeds its formation at andropause, when circulating testosterone levels are reduced below a certain threshold levels. Loss of bone make the skeleton less dense, porous and brittle.

Oestoporosis means "porous bones". There is a decrease in the mass of the bone without significant change in the volume. This leads to reduction in the density of bone (mass per unit volume). Oestoporotic bones become brittle and break easily. Oestoporosis is thus a condition of excessive skeletal fragility due to decreased bone mass and bone.

Oestoporosis manifests clinically by fragility fractures. Fragility fractures occur in the absense of trauma or in response to only trivial trauma (force equal to or less than a fall from a standing height).

Exercise retards/prevents osteoporosis

Exercise in young individuals enable them to attain the maximal genetically determined peak bone mass. An athlete, a boxer or a weight lifter has muscular body. Muscles place stress on the bones. Bones respond positively to muscular stress in direction of their long axes with increase in bone density. When the normal stresses placed upon bones by normal physical activity are removed, bone loose density. This is best illustrated in patient with spinal cord injuries who have significant loss of bone density. Impact activities are the best suited for the growth of bones. These activities include walking, jogging, dancing, and jumping rope, bicycling, ballet, hiking, etc. The greatest benefit of a life long habit of weight bearing exercise, such as walking or biking for the older people is that physical fitness reduces the risk of fracture, because improved coordination, better balance, muscle strength, and agility make falls less likely. In case of a fall the severity of injury upon fall is reduced.

The Ant Philosophy

There is another philosophy - the ant philosophy.

If you observe an ant, you can learn a lot.

- When you place an obstacle in front of an ant, it either goes around it, under it or above it. **Flexibility** is a great quality in an ant.
- An ant never **quits**. It is always focussed. In other words, it has the tremendous attitude of "Winners never quit; Quitters never win."
- In summer, it plans for winter, which speaks of its tremendous **planning ability.**
 - In winter, it waits **patiently** for summer.
- Ants operate as a **team**. They have the **humility** to follow the leader.
- At any time, it does all that is possible, thereby conveying the lesson, do all you can and more.
- Ants, while moving in a chain, have perfect co-ordination to send feedback to the ants following them about the path they are treading-a perfect **communication network.**

Know Your Heart

The World Heart Federation has declared the last Sunday of September as World Heart Day (WHD). This year the theme of WHD is "Know Your Risk". It immediatly raises the question of "risk of what?". The answer is 'developing heart attack in future'. Being an Indian is a high risk! Very few people know that being an Indian itself puts you at high risk of developing heart attack. Indians face 8 to 10 times higher risk compared to Chinese and Japanese and two-fold compared to Caucasians. This is due to our wrong food habits, sedentary life and central obesity. As per World Health Organisation, by 2020 more than half of world's cardiac patients will be from India.

How to know your risk? Heart disease is a lifestyle-related disease and hence a number of factors contribute. If you are a male of forty or a female (past menopause), you are at a higher risk. For men, the most important modifiable risk factor is smoking. Lack of exercise and over-weight also contribute to increased risks. Diseases like diabetes, elevated blood pressure and higher cholestrol are also powerful risk factors. But with the help of this parameters you can assess the risks you're prone to and modify yourself to make risk-free.

Various other factors also contribute to risks. You can evaluate your own risks at one of the best clinics. Modifying the risk factors is your best bet to a healthy heart. Let us strive hard to keep our hearts healthy.

*Dr. Rajan Joseph Manjuran*Director, Pushpagiri Heart Institute

Healthy Nutrition For Healthy Ageing Diet for diabetes mellitus

By Dr. V.S. Natarajan, Dr. N. Lakshmipathy Ramesh

Diabetes mellitus is a disorder characterized by high blood sugar, due to deficiency or diminished effectiveness of insulin. The disease is chronic and affects the metabolim of carbohydrate, protein, fat, water and electrolytes. Nutritional or diet therapy, treating a disease with the food you eat, is one of the most important aspects of caring for people with diabetes. For individuals with type 2 diabetes, dietary management is the only therapy necessary to treat the disease, and for individuals with types 1 and 2 diabetes, food intake is an integral part of medication decisions.

In most cases, elderly patients will have type II diabetes (adult- onset nonketosis-prone. noninsulin-dependent). The primary goals of dietary management in diabetes are to modify dietary intake and lifestyle as approriate for prevention and treatment of overweight, dyslipidemia, hypertension, cardiovascular disease, and nephropathy. Individual nutritional needs should be personalized, taking into consideration, personal variables like person's age, sex, activity level, current weight and body style, individual food habits and the family diet pattern, cultural preferences and lifestyle. The main objective is to promote overall health through good nutrition (balanced diet) so as to enhance quality of life.

The diet prescribed for diabetic patients has gone throght remarkable changes in the last few decades. Earlier diets for diabetic individuals consisted of a very low carbohydrate content. Later the diet was planned to supply 40%, 20% and 40% of their calories from carbohydrate, protein and fat respectively. This has further changed in past few decades, where the carbohydrate content of the diet has been increased to 60% with a reduction in fat content to 30%.

Primary goals of dietary management in individuals with diabetes are to

- * Attain desired blood glucose levels; to prevent or reduce the risk of complications of diabetes
- * Achieve target lipid levels that reduces the risk of cardiovascular disease.
 - * Control the blood pressure levels.
 - * Reduce excess body weight.
- * Personalize individual nutritional needs, taking into the consideration the individual's food habits and the family diet pattern, cultural preferences and lifestyle.
- * Promote overall health through good nutrition (balanced diet) so as to enhance quality of life

Dietary modifications for diabetic individuals should be implemented by prioritizing these goals.

Diet Management in Diabetic Elderly

Diet and weight loss (if applicable) is considered the treatment of choice in the elderly diabetic individual. Dietary challenges in the elderly include the presence of ill-fitting dentures, difficulty in chewing and swallowing, decreased ability and interest in cooking, agerelated changes in taste perception, reluctance to change long-established eating habits, physical and functional limitations, limited finances and reliance on others for meals.

The total number of meals and snacks and their timing throughout the day can differ for each person, based on his/her nutritional needs, lifestyle, and the action and timing of medications, Food should be distributed into small frequent feeds. Skipping a meal or fasting is not really advisable.

The energy that we get from foods, measured in calories, comes from three types of nutrients: fats, proteins and carbohydrates. Any food that

provides calories will raise blood sugar. Calorie restriction should be considered in obese patients. Although older diabetic patients are more likely than younger patients to have normal or even low body weight, a substantial proportion of elderly diabetic patients are overweight.

Calorie restriction is recommended in patients over 70 years of age who are less than 20% above their ideal body weight. Moderate weight loss in the elderly diabetic is associated with improved glycemic control. The goal of a diabetes diet plan is to provide a mixture of fats, carbohydrates and proteins at each meal, at an appropriate calorie level to both provide essential nutrients as well as create an even release of glucose into the blood from meal to meal and from day to day.

Carbohydrate

The word "carbohydrate" actually means "sugars and starches" Any food that is high in carbohydrate will raise blood glucose levels soon after a meal. Thus the carbohydrate content of the diet should be 60%. Foods high in carbohydrates include starches such as rice, breads, cereals, and similar foods; fruits and juices: vegetables; milk and milk products; and anything made with added sugars, such as sweets, puddings, cookies and cakes. The old concept that a diabetic individual should not take rice and only wheat or ragi should be used is not correct. All cereals, whether it is rice or wheat or ragi or cholam or jowar contain about 70% of starch. The type of cereal taken is not important; it is onlythe quantity that matters.

Protein

For a person with diabetes include 10 to 20 percent of calories from protein. Vegetables proteins like dhals, pulses and legumes are better than proteins.

Combination of cereals and pulses will enhance the protein quality. Mushrooms are low in calories but are high in protein.

Fat

A decrease in the proportion of fat in the diet, to less than 30% of calories, is recommended,

but fat restriction in older patients should be indivivualized. Fat intake should be reduced to prevent increase in blood cholesterol and prevent atherosclerosis (hardness of arteries). If malnutrition is present, fat restrictionis not appropriate, and an emphasis on energy and protein intake should be of primary concern. The type of fat to be used is very important. Reduce total fat and saturated fat. Use vegetable oils in moderation.

Types of fat

Saturated fats: Ghee, butter, cocnut oil, palm oil, vanaspathi (Better avoid)

Polyunsaturated fatty acids: Sunflower oil, corn oil (use in limited quantity).

Monounsaturated fatty acids: Groudnut oil, mustard oil, olive oil, safola oil (preffered).

Mono & Poly unsaturated fatty acids: Gingelly oil, rice bran oil (preffered).

Fibre

Fibre rich foods are very good gor controlling diabetes and for reducing blood cholestrol and decreasing the risks of colon and other cancers. The use of increased natural fibre, such as whole cereals, pulses like bengal gram, green gram and green leafy vegetables may be recommended. Soluble fibres from fenugreek seeds taken either as sprouted or in powder form can be a supportive therapy.

Vegetables

Unlimited amounts

All gourd varietie like ash gourd, bitter gourd, bottle gourd, ridge gourd, snake gourd, etc. beans, brinjals, sprouts, broccoli, cabbage, cucumber, cauliflower, chow-chow, drumsticks, ginger, greens (all varities), knoll khol, kovai, ladies finger, onions, plantain flower, plantain stem, tomato, white radish.

Moderate amounts

Carrot, beetroot, peas, double beans.

Avoid

Roots and tubers like potatoes, yam, colocasia and tapioca.

Fruits

Fruits like apple, orange, sweet-lime, papaya, gauva, pear, muskmelon, water melon, etc. may be taken:

When blood sugar is under control, treatment is by diet alone. In special conditions as prescribed by the dieticians.

Nuts & Oilseeds

Nuts like almonds, groudnut, walnut, cashewnut and pista are rich in fat but are free from cholestrol. It can be taken in limited quantities replacing the fat calories. Coconuts can be avoided.

Free Foods

Skimmed buttermilk, unsweetened lime/tomato juice, clear soup, pepper water (rasam), vegetable salads like tomatos, cucumber, onion, lettuce, capsicum, white radish.

Foods to be avoided

Sugar, honey, glucose, jam, jaggery, sweets, cakes, pastries, tender, coconut water, coconut, soft drinks, alcoholic beverages, butter bicuits, cream bicuits, etc. artificial beverages, banana, mango, jackfruit, sappota, custard apple (sitaphal), dry fruits like dates, figs and raisins.

Dietary Recommendations for Elderly Patients with Diabetes

- * Weight loss if obesity is present.
- * Increased protein and total caloric consumption if the patient is undernourished.

- * Decreased fat consumption (to less than 30 percent of calories)
 - * Include food rich in fibre.
- * Include plenty of green leafy vegetables and salads.
- * Avoid roots and tubers e.g.: potato, sweet potato, colocasia, yam, tapioca, but carrot and radish can be consumed.
- * Avoid sugar, glucose, jams, jaggery, honey, sweets, nuts, artificial beverages, etc.
- * Avoid fruits such as mango, banana, sappota, custard apple, etc.
 - * Avoid fried fruits and alcohol.

In summary, appropriate dietary management of diabetes includes a reduction in body weight by reducing the total calorie intake, modified fat both in quantity and quality, complex carbohydrateand adequate dietary fibre consumption. Following this diet pattern will help one acheive good control of diabetes, prevent complications, reduce drug requirement and maintain an ideal body weight. Successful adherence of dietary management depends not only on the patient but also on the effort of the integrated team consisting physician, dieticians and diabetes educator.

NEW LIFE MEMBERS OF AISCCON NEWS

- 1) Shri A.K. Inamdar
- 2) Shri V.K. Jadhav
- 3) Shri Chandrakant G. Athavale
- 4) Shri Prabhakar B. Kulkarni
- 5) Shri Hariyadan S. Dalal
- 6) Chembur Senior Citizens Association
- 7) Dr. D.B. Patange
- 8) Shri V. Chandrashekhar Nair
- 9) Shri Suresh R. Mehta
- 10) Shri Bhanwar Seth
- 11) Lion N. Malkondiah
- 12) Shri S.M. Chebbi
- 13) Shri M.K. Raina
- 14) Shri B.R. Antroliwalla
- 15) Shri C.S. Dhamankar
- 16) Shri Rashmikant C. Shah
- 17) Shri A.V. Rao
- 18) Shri J.B. Patel
- 19) Shri A.R. Desai

Many Thanks for your support.

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Belgaum

Juhu, Mumbai

Nerul, Navi Mumbai

Nerul, Navi Mumbai

Kanjur Marg (W), Mumbai.

-Mg. Editor

Strength Exercises

What should I Eat?

Your body needs fuel for exercises and physical activities, and that fuel comes from food. Eating the right nutrients from a balanced diet helps build muscle and energy. But just what does "balanced diet" mean? What should you eat, and exactly how much of it should you eat?

U.S. Department of Agriculture (USDA) hasissned guideline, for following a balanced diet. It tells you how many servings of each kind of food you should eat each day. It also adviser what, exactly, counts as one serving of each kind of food.

If you use this guideline you may also be helping to prevent or delay some of the diseases associated with growing older. For example, by cutting down your fats you will be reducing of getting cardiovascular disease like high blood pressure. By increasing the amounts of fruits and vegetables you eat, you will be lowering the risk of getting some types of cancer.

Looking at the guidelines, you will see the biggest part of calories you take in each grain should come from grains, and the smallest amount should come from fats, oils and sweets. The guidelines put heavy emphasis on vegetables and fruits, and less on meat and dairy products.

Some older adults are on restricted diets because of certain health conditions. Kidney disease is just one example of a condition that often requires restrictions of certain foods or fluids. If your doctor or nutritionist has asked you to follow a special diet, please follow his or her advice.

What is "a serving"?

Grains

1 slice of bread

1/2 cup of cooked rice or pasta

1/2 cup of cooked cereal

1 ounce of ready-to-eat cereal

Fruits

1 piece of fruit

1 melon wedge 3/4 cup fruit juice

1/2 cup canned fruit

1/4 cup dried fruit

Vegetables

1/2 cup of chopped raw or cooked vegetables

1 cup pf leafy raw vegetables

Milk, Yogurt and Cheese

1 cup of milk or yogurt

1-1/2 to 2 ounces of cheese

Example: a 1-inch cube of hard cheese weighs about 1/2 ounce.

Note: Buy low-fat or skim dairy products to avoid harmful fats.

Note: Some people have trouble digesting lactose, the sugar in milk products. If you have this problem, try eating yogurt with active cultures, low-fact cheese, or lactose-reduced milk. Pills and drops that help digest lactose also are available.

Meat, Poultry, Fish, Dry beans, Eggs and Nuts

1/2 cup of cooked beans, 1 egg or 2 tablespoons of peanut butter make up 1/3 of a serving of this food group.

2-1/2 to 3 ounces of cooked leanmeat, poultry, or fish make up one serving of this food group.

Examples: a slice of cooked, lean meat poultry that is about 1/4 inch thick and measures 3 inches by 4 inches weighs about two ounces; a cooked, lean hamburger patty that weighs 3 ounces is about 3 inches across and 1/2-inch thick-about the size of a large mayonnaise jar lid.

Note: Before cooking, a patty this size weighs about 4 ounces.

Note: Half of a skinless, cooked chicken breast weighs about 3 ounces.

Note: Egg whites are a good source of protein, but egg yolks are high fats and cholestrol. Consider discarding the yolk.

Note: Nuts are a good source of protein, but are high in fat.

Fats, Oils and Sweets

The less fats oil and sweets you eat the better.

IT'S REALLY NOT HARD TO EAT A BALANCED DIET

Do you look at the USDA guidelines and think, "How in the world will I be able to follow them? I'd have a hard time just eating the 6 to 11 servings of grain I'm supposed to eat daily!" Take a look at the sample menu below, and you might change your mind. This menu provides the minimum amount recommended for each of the food groups. You might feel that you are already eating a balanced diet and that you even have room to add more grains or fruits ot vegetables.

Breakfast:

- * Western-style omelet (use egg whites and egg replacers and low fat cheese)
 - * Oven baked hash-brown potatoes
 - * Whole-grain toast and jelly
 - * Small glass of fruit juice

Lunch:

- * Broiled lamon patty on a toasted whole grain bun.
 - * Spinach
 - * Rice
- * Fruit salad with low-fat or nonfat yogurt dressing

Dinner:

- * Pasta with tomato-and-onion sauce, topped with low-fat parmesan cheese (lean meatballs optional)
 - * Garlic bread.
 - * Salad with low-fat or nonfat dressing.
 - * Low-fat ice cream or frozen yogurt.

THE BIG PICTURE

Often, people decide to exercise and eat a balanced diet because they want to control their weight. For many people, these healthy habits do result in weight loss... but that's only part of the big picture. Excercise and a healthy diet can help make you healthier. But they are just one part of becoming physically fit. Think about other lifestyle changes you can make, too. For example, smoking contributes to a variety of serious disease and can keep you from excercise.

So does excercise sive alcohol. Together, habits like excessive, a balanced diet, and giving up smoking will will help you acheive what we wish for you: the best health.

Chapter Summary

A balanced diet is important for everyone, including older exercisers. To find what "balanced diet" means, read the U.S. De partment of Agriculture food-pyramid guidelines. The guidelines say that the largest part of your calorie intake should be from grain based foods: the next largest from vegetables and fruits: then fish, poutry, meat and dairy products. The less fats oils and sweets you eat the better.

The best way to get the nutrients you need is through a healthy diet, not through expensive supplements that you might not need. Whole foods provide many nutrients we know about, and probably contain others that haven't been discovered. You might read or hear many convincing, scientific-sounding claims about nutritional supplements, such as megadoses of vitamins and minerals, but not all of them are based on fact. Some supplements may be helpful in certain situations, but others may cause harmful side effects. Before taking supplements of any kind, check with your doctor.

If your doctor or nutritionists has asked you to eat or avoid certain foods or fluids because of a medical condition, please follow his or her advice.

SUPPLEMENTS: COSTLY AND NOT NECESSARILY HELPFUL

Supplements are helpful for some older adults who can't eat all the nutrients they need-nutrients like vitamins and minmerals. Recently, however, some new kinds of supplements have been appearing in stores even though they haven't been shown to improve health and their safety remains unproven.

A balanced diet is the best way for most older exercisers to get the nutrients they need. But some people in the marketing industry are doing a good job of convincing older people that they need expensive nutritional supplements, some of which haven't been shown to be helpful or safe and some of which older people which most older people may not even need. Some of these claims give older adults more impression the certain supplements can restore certain youthful energy and strength.

For example, one persuasive clerk at a popular health-food store recently told an old shopper interested in exercise that she should buy certain supplements that cost about \$70 a month to increase her energy and her ability to build muscles. The supplements included a protein powder and a vitamin-mineral pill containing the same ingredients as generic-brand vitamis, available at a fraction of the cost at drug stores, and some other substances not proven to build muscles or energy in older people.

This 75-year-old shopper had eaten an excellent diet based on the USDA food-pyramid for years, and really didn't need these supplements.

No one likes to spend money needlessly, but for older adults on a limited income-Social Security, for example-unecessary expenditures can deprive them of things they really do need (the money to buy whole foods rich in nutrients, for example). What's more, too much protein puts extra demands on the kidneys and lower calcium levels. Although protein, vitamin and mineral supplements are helpful to older people who truly need them, excessive doses can have harmful side effects.

A clerk at another health-food store told the same shopper that, if she planned to start exercising, she would buy a powder made of protein, vitamins and minerals that cost \$19 for a 10-serving bottle. Taken once a day, that comes out to about \$60 a month. One of the reasons she neede this supplement, the clerk told her, was that it contained the mineral potassium and "older people require more of that."

Taken as directed on the label, the supplement wouldn't have harmed our intrepid shopper. But the clerk's scientific sounding advice might have. Overdoses of potassium can cause an irregular heartbeat and even death.

For most older adults, standard FDA-

approved multivitamin-mineral supplements that contain potassium are just fine if taken as directed. It would be virtually impossible for most people to overdose an potassium by eating foods that contain this essential mineral naturally. Some people really do need potassium supplements, as prescribed by a doctor, only, for very specific medical conditions and in very specific carefully monitored amounts. The point we are making here is anyone can make scientific sounding claims, but it doesn't necessarily mean that those claims are true or safe. This caution is especially important for people who are on diets with special resrictions-people with kidney disease, congestive heart failure, or diabetes, for example.

Buyer, beware-and check with your doctor before spending your hard-earned money on supplements that promise to restore youthful energy and strength.

FACTS:

Did you know that your body use vitamin D to absorb calcium, which makes your bones stronger and helps prevent fractures? Vitamin D is manufatured in the skin following direct exposure to sunlight. The amount of vitamin D produced in the skin varies depending on the time of day, season, latitude and skin pigmentation.

While many people get enough vitamin D naturally, studies show that vitamin D production decreases in older people and in those who are housebound. These people may need to take vitamin D supplements to ensure a daily intake of between 400 to 800 IU (international units) of vitamin D.

Tips: Major food sources of vitamin D are vitamin D-fortified dairy products, eggs, saltwater fish, dark green vegetables and liver. Some calcium supplements and most multivitamins contain vitamin D, so it's important to read the labels to find out how much each contains.

Caution: Massive doses of vitamin D may be harmful and are not recommended.

President's Delhi Tour:

AISCCON President Dr S P Kinjawadekar and Secretary General Shri D N Chapke were on tour of Delhi from 22nd Nov. to 27th Nov. 08. On 23rd Nov. they were joined by the Jt. Secretary, Shri B B Dixit, at Nizamuddin Station.

On 24th morning they went to Chhattarpur Temple Complex, alongwith Prof. Sugan Bhatia, Advisor to 8th National Conference, Shri J.R. Gupta, Convenor, 8th National Conference and Shri Premsagar Relli, Editor, Happy Old Age. They visited the Conference Venue and decided on necessary arrangements for the Conference.

In the evening they had a meeting with Prof. Bhatia for drafting suitable letters for the Chief Guests and lecturers to be invited to attend the Conference.

On 25th morning, they had a meeting with Prof. Bhatia at India Habitat Centre from where they went to Shastri Bhawan to meet Dr.

Arbind Prasad, Jt. Secretary, Ministry of Social Justice & Empowerment and Shri V.B. Pachnanda, Director Ageing for discussion on some important problems of Senior Citizens. Both the Hon'ble Ministers of Social Justice & Empowerment were given letters requesting them to attend the 8th National Conference on 23/24 Dec.08.

On 26th Nov. they went to Safdarjung Enclave to meet the Conference Committee Members where, the President Dr S P Kinjawadekar explained the expectations from every committee. Then they went to India Habitat Centre to meet Prof. Bhatia to collect letters for VIPs. At Shastri Bhawan they met Shri V.B. Pachnanda, Director Ageing. We waited to see Hon'ble Minister of State for Social Justice Smt. Subbulakshmi Jagadeesan, who informed her acceptance to attend the Valedictory Function in the Conference on 24th evening. we also requested the Secretary MSJ&E. Shri K.M. Acharya to preside over one session of the Conference.

The President & Secretary General returned to Mumbai on 27th Nov. 08.

-D.N. Chapke Secretary General AISCCON.

Andhra Pradesh:

(A) The Executive Committee Meeting of FAPSCO was held on 5th Sept. 08 at Satyodayam, Secunderabad when the following decissions were taken- It was resolved to request the State Govt. (a) to involve the District Level Committee (DISCOs) in finalising & maintaining the OAH under the Act, (b) to

finalise the list of eligible pensioners under the National Old Age Pension Scheme, (c) to give priority to Senior Citizens for treatment in Hospitals and Govt. offices, (d) to provide accomodation to Senior Citizens Associations for their activities at the District / Tehsil level, (e) APSRTC should provide fare concession to

Senior Citizens as given by Rlys, (f) to direct all Municipal Corporations / Municipalities to take up Welfare activities as done by GHMC.

Railways should extend fare concession to one attendent accompanying 80+ Senior Citizens. All Senior Citizens irrespective of class, should be allowed into the waiting rooms of the Railways; to enable them to use toilets etc.

- Dr Rao V B J Chelikani

(B) Association for the Care of the Aged, Hyderabad founded on 15th Aug. 1976 has completed 34 years of service to the Senior Citizens. (a) It runs a Home for the Aged at Shivarampally, Hyderabad since 1987, and has 40 inmates at present (b) It runs a free Clinic for public in association with Malathi S Jatkar Trust, Chikadpally, Hyderabad. (c) The Association publishes a montlhy News Letter 'Twilight Life' having a circulation of over 1000 copies per month. (d) It maintains a library of spiritual & general books. (e) Mahila Vibhagh of the

CONFEDERATION

NEWS

Association conducts special programmes for lady members. (f) The present membership of the Association is 1375. ((g) The Association received the Award of Best Senior Citizens Associations (Urban) from INFA Mumbai in 2005 and from AISCCON in 2006, at Bhopal.

The Association felicitates a distinguised Senior Citizens every month. On 11th Oct. 08 Shri R.N. Mital, Chairman, Senior Citizens Association Secunderabad was felicitated & on 8th Nov. 08 Shri B. Sreeramulu (Dy. Chief Engineer, R&B) and Shri V.N. Murthy (Retd. Physical Director) were honoured.

-Shri Y.V. Rathnam, Working President

(C) Krishna Dist. Senior Citizens Welfare Association Vijayawada:

Braving the Scorching Sun, around 200 Senior Citizens of the Association took out a rally from Tummalpalliwari Kshetriya Kalakshetram to Collector's Camp office on 1st Oct. 2008, the World Elders Day, to draw the attention of the officials to their problems. The rally, with most of the participants in their Seventies, took an hour and a half to cover the 2 km distance.

As District Collector, Shailaja Ramaiyer was not available, the delegation met the Municipal Commissioner P.S. Pradyumna and submitted him a memorandum of demands. The Association President B Mukunda Rao. Secretary K. Lakshminarayana and freedomfighter P. Pattabhirama Rao urged him to allocate a 500 sq.mtr. land in the city to the Association for construction of the office. The other demands were (a) payment of monthly pension of Rs.800/ -, to BPL Senior Citizens, (b) opening of Day-Care-Centres, (c) Making available Rajiv Arogyashri Scheme to all Senior Citizens, (d) Geriatric wards in the Hospitals and (e) representation to the Association on various developmental Committee in the District.

Shri Pradyumana explained to the Delegation various steps being taken by the Corporation for the Welfare of Senior Citizens.

-B. Mukunda Rao, President

Senior Citizens Council of Delhi, Delhi:

Senior Citizens Council of Delhi has created a network of more than 600 active Senior Citizens (60 yrs to 102 yrs) comprising of retired judges, army / civil officers, businessmen, doctors, advocates, engineers and chartered accountants, who are participating in the Sarva-Dharma religious discourses, yoga activities, talks, lectures, interaction sessions, Panel discussions free health check up camps, cultural & social activities between 7.00 A.M. & 8.00 A.M. daily in Deer Park, near Hauz Khas Village, New Delhi for the last 29 years after coming from different parts of Delhi particularly South Delhi. Eminent Speakers across the Country are addressing the Senior Citizens daily on various subjects.

The council has also created three branches of daily satsang at Shiv Mandir, Green Park (5 to 6 p.m.), Sadbhavns Satsang Mandal, Munika DDA Flats (Every Sunday - 9.30 am to 10.30 am) & Ram Rasik Parivar, Mehrauli (Every Saturday - 9 pm to 10 pm.)

Majority of the members lead a solitary life in Delhi because either their children are settled in foreign countries or they live out of Delhi away from their parents. Our endeavour is that they may not feel secluded. The council is determined to keep them always cheerful, active and healthy.

The President of the Council Shri J.R. Gupta is also a Non-official Member of Delhi Govt. State Council for Senior Citizens. The Council is registered under Societies Registration Act of XXI, 1860 and recognized by the Ministry of Social Justice & Empowerment, Govt. of India. The Council has signed a M.O.U. with Senior Citizens Council of Mauritius to promote exchange of groups of elderly of both the Countries. In the month of Feb. 2007, a delegation of 26 members from Mauritius was hosted by our Council for one week. Simultaneously, a delegation of 35 members also visited Mauritius in the last week of July, 2007. The main aims of the Council are as under:-

1. To get the Identify Cards issued to Senior

Citizens aged 60 yrs. & above from Delhi Govt.

- 2. To build pressure on Govt. of India, Ministry of Finance to extend existing Income Tax benefits at the age of 60 years which are now available at the age of 65 years. Also to get higher interest rates on the deposits made by Senior Citizens.
- 3. To build pressure on Ministry of Railways to increase the railway fare concession to Senior Citizens from 30% to 50% as extended to female Senior Citizens.
- 4. To distribute free blankets to the needy and poor persons every year on the occasion of Makar Sankranti. And also free distribution of stationery and copies to poor students of M.C.D. Primary Schools every year on the occasion of Annual Day.
- 5. To create awareness among Senior Citizens living in Delhi about the facilities and benefits being made available under State Polices of Delhi Govt. and Govt. of India for Senior Citizens.
- 6. To assist below poverty line Senior Citizens in getting them Old Age Pension of Rs.600/- per month from the Delhi Govt. at the age of 60 years and Rs.1,001/- at the age of 100 years w.e.f. 01-10-2007.
- 7. To coordinate with the Delhi Police for the safety & security of Senior Citizens who are living along.
- 8. To assist Senior Citizens to get their bills deposited pertaining to electricity, water, telephone & property tax.

Senior Citizens Council of Delhi is affiliated to AISCCON and is the host of 8th National Conference of AISCCON.

- **J.R. Gupta** President, Mob.: 9810488059

गुजरात:-

(ए) सीनियर सिटिजन्स फेडरेशन (गुजरात राज्य) अहमदाबाद:

गुजरात राज्य शासनने दि. ७ अक्टूबर २००८ के गॅजेट नोटिफिकेशन द्वारा यह घोषित किया कि इसी तारीख से मेंटेनन्स अँड वेल्फेयर ऑफ पेरेंट्स अँड सीनियर सिटिजन्स ॲक्ट २००७ (५६-२००७) गुजरात राज्य में लागू होगा।

फेडरेशन के महासचिव ने मान. मंत्री श्री फकीरभाई वाघेला का इस निर्णय पर अभिनंदन किया है और आशा व्यक्त की है कि इस कानून के अमल के लिये रूल्स भी शीघ्र ही राज्य शासन मंजुर कर लेगा।

–अमृतभाई मोढ

महासचिव, सी.सि. फेडरेशन (गुजरात राज्य)

(बी) सीनियर सिटिजन्स राष्ट्रीय संगठन, सुरतः

सीनियर सिटिजन्स राष्ट्रीय संगठन, सुरत, सीनियर सिटिजन्स क्लब, सलाबतपुरा, सुरत, सीनियर सिटिजन्स फेडरेशन (गुजरात प्रदेश) और सीनियर सिटिजन्स ग्रुप, सुरत के सदस्यों ने दि. ३ अक्टूबर २००८ को सुबह ११ वजे सुरत कलेक्टर कचेरी पर एक मोर्चा निकाला और अपनी मांगों का एक आवेदन कलेक्टर को सौंपा। इसमें मुख्य मांगे थी— १) राष्ट्रीय वृद्धजन नीति का क्रियान्वयन शीघ्र किया जाय, २) मेंटेनन्स अँड वेल्फेयर ॲक्ट २००७ राज्य में तुरन्त लागू किया जाय, ३) सरकारी तथा महापालिका अस्पतालों में वयस्कों को मुफ्त तपास और चिकित्सा की सुविधा हो, उनमें जरा रोगकक्ष बनाया जाय, ४) राज्य परिवहन बसों में वयस्कों को ५०% किराया छूट दी जाय, ५) बैंक साविध जमा राशि पर २% अधिक ब्याज दिया जाय।

–कांचनसिंह ठाकोर, मंत्रा

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(सी) शुद्धिपत्र:-

अक्टूबर २००८ के आइस्कॉन समाचार में पृष्ठ १२ पर आइस्कॉन भवन फंड के लिये २००७-२००८ में जमा दानराशियों में क्र. ६ और ७ पर श्री सूर्यकांत परिख, भरुच, रु. ११,१११/-, डॉ. महेंद्रभाई शाह, व्यारा रु. ११,१११/- लिखा है, वह वास्तव में उनके एसोसिएशन से प्राप्त दानराशियां है। इसमें निम्नानुसार शुद्धि पढ़ी जाय।

- ६) सीनियर सिटिजन्स ग्रुप, भरुच रु.११,१११/-
- ७) सीनियर सिटिजन्स ग्रुप, व्यारा रु.११,१११/-गलती के लिये खेद है। -मैनेजिंग एडिटर

Haryana

Retired Rly Employees Welfare Assocation, Gurgaon:

The Associations Website **www.rrewa.org** has been a great hit. This website has achieved the landmark of 15000 visitors on 1-9-08- i.e.

just in 8 months. We are already in link of 5 reputed websites of Senior Citizens & Pensioners. Our activities have come to the notice of DOP - GOI Ministry of Personnel, PG & Pension and the Association is identified for implementation of mission mode web-based pensioners portal. On 4/4/07 we had the honour to represent pensioners in the National Conference of Senior Citizens Federations of Hyderabad.

From 2005 we were pursuing the Medical Deptt. to start Smart Card Scheme for the Emergency treatment of RELHS beneficiaries. Due to the efforts of our patron Shri V.K. Agarwal the Smart Card Scheme is launched as a pilot project by the Northern Railway in Delhi area.

Health Check-up Camp was held on 26th July 08 at Rail Vihar Gurgaon. Another Camp is planned in Nov. 08.

We continued helping Rly pensioners & their families in distress.

This year, 11 life members of RREWA have donated their eyes.

- Er. S.C. Maheshwari Gen. Secretary, RREWA

मध्य प्रदेश-

(अ) प्रबुद्ध परिषद, उज्जैन:

आंतरराष्ट्रीय बुद्ध दिवस पर परिषद ने दि. १ अक्टूबर २००८ को विभिन्न मांगों के लिए कलेक्टर उज्जैन को ज्ञापन सोंपा और परिषद के १४ सूत्री मांगों का निराकरण चाहा। वृद्धजनों की आयु राष्ट्रीय वृद्धजन नीति के परिप्रेक्ष्य में ६० वर्ष या उससे अधिक को एक समान माना जाय। गरीब वृद्धों को राष्ट्रीय वृद्धजन पेन्शन प्रतिमाह रु. ५०० मिले, अन्नपूर्णा व अंत्योदय योजनानुसार नियमित सुविधाएं मिले, वृद्धजनों को आयुबंधन रहित व उचित प्रीमियर पर मेडिक्लेम योजना लागू हो, वृद्धजनों को बैंक, पोस्ट ऑफिस, पी.पी.एफ. खातों में और सावधि जमा राशि पर २% अतिरिक्त ब्याज मिले, आदि मांगे इसमें शामिल है।

दि. २१-९-०८ को स्वतंत्रता संग्राम सेनानी श्री अवन्तीलाल जैन की अध्यक्षता में परिषद सदस्य श्री शरदचंद्र पण्ड्या, आईएएस के निधन पर परिषद के सदस्यों नें श्री पण्ड्या व शहीद पुलिस अधिकारी मोहनचन्द जी शर्मा, दिल्ली को श्रद्धांजलि दी और उनके स्मृति में २५ नये पौधों का रोपण किया।

-शिवप्रसाद शर्मा, सचिव

(आ) सेवानिवृत्त पेन्शनर एवं वरिष्ठ नागरिक महासंघ, मन्दसौरः

मतदान - महादान।

मतदान के समय, स्विववेक से मतदान करने की अपील। विधानसभा तथा लोकसभा निर्वाचनों में यह संदेश ध्यान में रखते हुए मतदान करें।

ना समझोगे तो मिट जाओगे,

ऐ वरिष्ठ नागरिक कहलाने वालों।

तुम्हारी दास्तां नहीं होगी, इस देश की दास्तानों में - हम जागृत एवं सचेत रहकर चुनावी प्रलोभनों से दूर रहकर, भयमुक्त होकर, आगामी निर्वाचनों में मतदान करें, अन्यथा 'चिडिया चुग गई खेत' की उक्ति ही चरितार्थ होगी।

जागत है सो पावत है, सोवत है सो खोवत है। जो हम बुजुर्गों की चिन्ता करेगा, उनकी हम चिन्ता करेंगे।

–दौलतराम पटेल. अध्यक्ष

महाराष्ट्र:-

अ) फेस्कॉम नियामक मंडल की सभा:-

दि. १५ अक्टूबर २००८ को गायत्री भवन, इचलकरंजी जिला कोल्हापुर में फेस्कॉम के नियामक मंडल की सभा श्री म.भा. कुलकर्णी की अध्यक्षता में हुई, जिसमें ४९ सदस्य उपस्थित थे। मुख्य सचिव श्री अनिल कासखेडीकर ने सभी का स्वागत किया और दि. ९ जून ०८ की सभा का इतिवृत्त पढ़ा जो मंजूर हो गया।

विगत ३ महिनों में निम्न विशेष कार्यक्रम हुए।

- (१) महासंघ की वार्षिक साधारण सभा दि. ३० जुलै २००८ को नाशिक में संपन्न हयी।
- (२) जागतिक वृद्ध दिन के उपलक्ष्य में सदस्य संघों ने तथा प्रादेशिक विभागों ने अक्टूबर के पहले सप्ताह में प्रधानमंत्री मा. डॉ. मनमोहन सिंह तथा मुख्य मंत्री मा. विलासराव देशमुख को वरिष्ठ नागरिकों की मांगों का ज्ञापन भेजा।
- (३) दि. ५ अक्टूबर ०८ को जलगाव में प्रख्यात उद्योगपति तथा समाजसेवी श्री भंवरलाल जैन को एक विशेष कार्यक्रम में मानपत्र तथा महासंघ का सन्माननीय सदस्यत्व प्रदान किया गया।

- (४) दि. १४-१०-०८ को कोल्हापुर प्रादेशिक विभाग की ओर से आयोजित सभा में प्रसिद्ध किव श्री जगदीश खेबुड़कर (कोल्हापुर) और श्री मदनलाल बोहरा (इचलकरंजी) का सम्मान किया गया।
- (५) दि. १६ और १७ सितंबर ०८ को महाराष्ट्र सेवा संघ, ऐरोली, नवी मुंबई में कार्यकर्ता गुणसंवर्धन और विकास शिबिर का आयोजन किया गया।

सहकोषाध्यक्ष श्री वा.ना. रायकर ने बताया कि आगामी वर्ष में महासंघ के चुनाव होंगे, अतः २००९-१० का शुल्क ३१ मई २००९ के पूर्व जमा होना आवश्यक है।

कुल ९४ नये वरिष्ठ नागरिक संघों को संलग्नता प्रदान की गयी। इनमें - नगर - नाशिक विभाग के २१, पुणे के १८, खान्देश के १७ और विदर्भ पश्चिम के १६ संघ प्रमुख है।

-अनिल कासखेडीकर, मुख्य सचिव

(आ) खान्देश प्रादेशिक विभाग:-

जागतिक वृद्ध दिन के कार्यक्रम:-

- (१) दि. १ अक्टूबर ०८ को जलगाव शहर और तहसील के ५० विरष्ठ नागरिकों ने मा. कलेक्टर, जलगाव तथा मा. तहसीलदार, जलगाव के कार्यालय में जाकर विरष्ठ नागरिकों की मांगों का ज्ञापन दिया। मोर्चा का नेतृत्व श्री दत्तात्रय चौधरी, अध्यक्ष, फेस्कॉम खान्देश प्रादेशिक विभाग, श्री ल.व. बोण्डे, सचिव, श्री रा.रा. वसाने, कोषाध्यक्ष ने किया।
- २) दि. १-१०-०८ सुबह ७ बजे चक्रधर स्वामी ज्येष्ठ नागरिक मंडल, भादली, बु. की ओर से अध्यक्ष श्री मुरलीधर महाजन के नेतृत्व में प्रभात फेरी का आयोजन हुआ, जिसमें वरिष्ठों के साथ विद्यार्थी भी शामिल थे।
- ३) पूज्य साने गुरुजी ज्येष्ठ नागरिक मंडल, तांदळवाडी, ता. रावेर की ओर से अध्यक्ष श्री पंडित भगवान चौधरी के नेतृत्व में मा. तहसीलदार रावेर को ४० वरिष्ठ सदस्यों ने मांगपत्र सुपूर्त किया।
- ४) मुक्ताईनगर, तहसील के ज्येष्ठ नागरिक संघों के प्रतिनिधिओं ने श्री ना.वि. चौधरी के नेतृत्व में मुक्ताईनगर के तहसीलदार को मांगपत्र दिया।
- ५) इसी तरह नंदुरबार, साकी, शिरपुर, धुले आदि गांवों में ज्येष्ठ नागरिक संघों ने अ.भा.व.ना. महासंघ के मांगपत्र स्थानीय वरिष्ठ अधिकारियों को सुपूर्त किये।

-दत्तात्रेय चौधरी, अध्यक्ष

अ) ज्येष्ठ नागरिक महासंघ, पिंपरी-चिंचवड की

ओर से पुणे विद्यापीठ की सहायता से एक कार्यशाला का आयोजन भोसरी विरंगुळा केंद्र में दि. १९ सितंबर ०८ को किया गया। इस महासंघ में करीब ३० ज्येष्ठ नागरिक संघ और २ निवृत्तों के संगठन कार्यरत है। (सदस्य संख्या ८०००)। संस्था की तरफ से अनेक सामाजिक उपक्रम किये गये। मेन्टेनन्स अँड वेल्फेयर ऑक्ट २००७ पर एक कार्यशाला का आयोजन किया गया। महानगरपालिका का पूरा सहयोग मिलता है। करीब १५० वरिष्ठ नागरिक कार्यशाला में उपस्थित थे।

कार्यशाला की पार्श्वभूमी पुणे विद्यापीठ के डॉ. भरत जेठीथोर ने विशद की। देश में आज ४५० विद्यापीठ और १०० डीम्ड युनिवर्सिटीस है। लेकिन केवल ६-७% विद्यार्थी इनका लाभ लेते है। सामाजिक समस्याओं को ध्यान में रखकर हमे शिक्षाप्रणाली में परिवर्तन करना जरूरी है, इसी विचार से राष्ट्रीय प्रौढ शिक्षा की शुरूआत हुई। शिक्षितों को ग्रामीण विभागों में जाकर सुधार करने की कोशिश करनी चाहिये। इसी दृष्टि से हमारे कुलगुरू डॉ. नरेन्द्र जाधव ने व्यसनाधीनता, असंगठित कामगार, महिला, राष्ट्रीय एकात्मता ज्येष्ठ नागरिक ऐसे विषयों का अभ्यास करने का विद्यार्थीयों का आवाहन किया। हमारे अभ्यास में यह दिखाई दिया कि समाज में वरिष्ठों की समस्याओं पर उदासीनता है। इसीलिये आजकी कार्यशाला का विषय है -क्रियाशील वृद्धत्व। वरिष्ठ कार्यरत रहेंगे तो ९ करोड वरिष्ठों की कोई उपेक्षा नहीं कर सकेगा। पुणे विद्यापीठ से वरिष्ठों के लिये स्वतंत्र कक्ष बनाया है। उनके उच्च शिक्षा की व्यवस्था की है।

महापौर श्रीमती अपर्णा डोके ने कार्यशाला का उद्घाटन किया। यहाँ के विरष्ठ तरूणों जैसे क्रियाशील, तंदुरस्त और उत्साही दीखते है। आपके अनुभव, ज्ञान का युवा पीढ़ी का उपयोग होना जरूरी है।

पुणे के प्रसिद्ध सामाजिक कार्यकर्ता डॉ. बाबा आढाव ने कहा- आज भारत में बच्चे अपने मातापिता की जिम्मेदारी टालते है। यहाँ केवल १०% विरष्ठों को पेन्शन मिलती है। अमरीका में हरेक विरष्ठ नागरिक को कम से कम १००० डॉलर मासिक पेन्शन मिलता है। सम्मान मिलता है। यहा दारिद्रच रेखा के नीचे जो वृद्ध है, विधवाए है उनके भरणपोषण और कल्याण का ख्याल हमें करना चाहिये। समाजव्यवस्था में जो परिवर्तन आवश्यक है उस पर आपको विचार और कार्य करना चाहिये। तंदुरस्त रहिये और जान है तब तक सतत कार्यरत रहिये।

श्री रमणभाई शाह ने राष्ट्रीय वृद्धजन समिति (NCOP) के कार्य को संबंध में और MWPSL Act की जानकारी दी। डॉ. धनंजय लोखंडे ने सभी को धन्यवाद दिये।

दोपहर के सत्र में कर्नल माधव आठवले जी का वार्धक्यशास्त्र पर व्याख्यान हुआ। वयोवर्धन के साथ आदमी के शरीर और मन में जो परिवर्तन होते है उनकी जानकारी उन्होंने सोदाहरण दी। भारतीय शास्त्रों के अनुसार मनुष्य की आयुर्मर्यादा १२० वर्ष की है। ब्रह्मचर्य, गृहस्थ, वानप्रस्थ और सन्यास - प्रत्येक आश्रम ३० वर्ष का है। ६० से ९० वर्ष का काल, वानप्रस्थाश्रम का है। इसमें अधिकाधिक समाज सेवा के काम करिये। अपना ज्ञान, अनुभव, धन जितना दूसरों को बाटेंगे, उतना ही बढ़ेगा।

तत्पश्चात् डॉ. एस.पी. किंजवडेकर का राष्ट्रीय वृद्धजन नीति पर विस्तार से भाषण हुआ। पुनरूत्पादन में गिरावट और आयुर्मर्यादा में वृद्धि के कारण दुनियाभर सभी देशों में विरष्टों की संख्या बढ़ रही है। १९५१ में भारत में २ करोड ४० लाख विरष्ठ थे, २००१ में ७ करोड ६० लाख हो गये और २०५० में ३२ करोड ६० लाख होने की संभावना है। आज प्रतिवर्ष करीब २५ लक्ष लोग ६० वर्ष पूर्ण कर विरष्ठ बन जाते हैं। हमें ६० वर्ष तक क्रियाशील रहना आसान है। रोज नियमित रूप से कम से कम आधा घंटा तेजी से चलना, संतुलित लेकिन कम मात्रा में (मिल) आहार लेना, किसी न किसी सामाजिक कार्य में जुटे रहना, जीवन के प्रति सकारात्मक (Positive) द्रष्टि रखना, इन साधनों से हम ८० के बाद भी क्रियाशील, संतुष्ट जीवन का आनंद ले सकते है।

आ) नवी मुंबई महानगर पालिका द्वारा जागतिक वरिष्ठ नागरिक दिन सम्पन्न:-

दिनांक १ अक्टूबर २००८ को केमिस्ट भवन सानपाडा में न.मुं.म.पा. द्वारा जागतिक विरष्ठ नागरिक दिवस पालकमंत्री मा. श्री गणेशजी नाईक की प्रमुख उपस्थिति में संपन्न हुआ। समारोह की अध्यक्षता महापौर श्रीमती अंजनी भोईर ने की, और विशेष अतिथी के रूप में महापालिका आयुक्त श्री विजय नाहटा और अ.भा. विरष्ठ नागरिक महासंघ के अध्यक्ष डॉ. किंजवडेकर उपस्थित थे। समारोह के पहले मा. मंत्रीजी के हाथों सानपाडा में महापालिकाने बनाये पहले डे केयर सेंटर का उद्घाटन हुआ। इस वर्ष में ८ डे केयर सेंटर का निर्माण होनेवाला है।

आयुक्त श्री विजय नाहटा ने कहा - १ वर्ष पूर्व इसी कार्यक्रम में विरिष्ठ नागरिकों के नेताओंने महापालिका लिये निर्णयों का क्रियान्वयन नहीं करती ऐसी टिप्पणी की थी, तब मैंने आश्वासन दिया था कि १ महिने के अंदर विरिष्ठ नागरिक कक्ष (cell) बनाएंगे, और उसकी पूर्ति की। कक्ष की सभा में हुए निर्णयानुसार विरंगुळा केन्द्र (डे केयर सेंटर) बन रहे हैं। पहले केन्द्र का शुभारंभ आज हुआ। अन्य ७-८ केन्द्र इसी वर्ष में बन जाएंगे। अपना कर्तव्य समझकर, कृतज्ञताकी भावना से हम यह काम कर रहे हैं। यह शहर विरष्ठों का अधिकाधिक सम्मान करनेवाला बने यही हमारी अपेक्षा है।

डॉ. किंजवडेकर ने मा. मंत्रीजी को और आयुक्त साहब को विरिष्ठ नागरिक कक्ष स्थापन करने पर और महापालिका विरिष्ठों के लिये क्या कर रही है इस पर पुस्तिका प्रकाशित करने पर हार्दिक धन्यवाद दिये। साथ ही मंत्रीजी को, उनके आश्वासनानुसार नेरूल में बन रहे विरिष्ठ नागरिक भवन के लिये आर्थिक सहायता देने का आग्रह किया।

महापौर श्रीमती अंजनी भोईर ने सभी वरिष्ठों को जागतिक वरिष्ठ नागरिक दिन के उपलक्ष्य में बधाई दी और अपेक्षा की कि आपके समृद्ध ज्ञान और अनुभव का लाभ महापालिका के माध्यम से लोगों को मिले।

७५ वर्ष पूर्ण िकये अनेक विरिष्ठों का वैसे ही विशेष सामाजिक कार्य िकये विरिष्ठों का मा. श्री गणेशाजी नाईक के हाथों सम्मान िकया गया। अपने भाषण में उन्होंने कहा — डोंबिवली में हुए फेस्कॉम के अधिवेशान में उपस्थित रहकर मैं बहुत प्रभावित हुआ। अपने बच्चों के शिक्षा और उत्कर्ष के लिये मा-बाप बहुत कष्ट करते है। लेकिन कुछ कुपुत्र ये उपकार भूलकर उन्हें सम्मान नहीं देते। यह बदलना जरूरी है। अखिल भारतीय विरष्ठ नागरिक महासंघ के अध्यक्ष नवी मुंबई में रहते है, यह हमारा सम्मान है। वृद्धाश्रमों की संख्या कम करने के लिये रंजन केन्द्रों की (डे केयर सेंटर) संख्या बढ़नी चाहिये, यह उनका प्रतिपादन बिलकुल सही है। वृद्धाश्रमों से उनकी अधिक जरूरत है। घर का वातावरण ठीक न हो तो वृद्धों को रंजन केन्द्र आधार जैसे, अच्छे लगेंगे। आपको कोई भी समस्या हो तो मुझे बुलाइये। मैं जरूर आऊंगा। नवी मुंबई महानगरपालिका की बसों में आपको दिवाली से, बस किराये में ७५% छूट दी जाएगी।

-श्री. शेजाळे, सानपाडा

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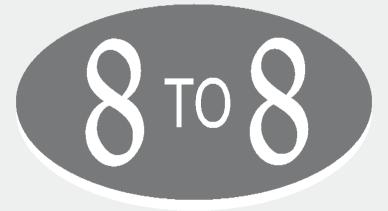
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