



AISCCON NEWS

आइस्कॉन समाचार

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Growing Old Gracefully

By Sadanand B Kumta, Pune

If the old want the evening of their life to have the golden hue of a beautiful sunset, they have to know and practice the art of growing old gracefully. The latter is only a part of the art of living - a subject on which there are good many books, such as; the Art of Living by Andre Marois or 'the Importance of Living' by Lin Yutang etc. But for knowing the purpose and meaning of life, they may study Bhagwad Gita or Thiru - Kural.

The Macro-Picture: Before dwelling on individual behaviour, we may have a look at the macro picture. Against the background of modernism and economic progress, there appears to be a widening gulf between the mainstream population and the ageing group. Also there seems to be a perceptible degradation of the family value system and rapid rise in nuclear families which make parents and grand parents feel alienated due to slackening of inter-generational bonds.

So I have begun this analysis with identifying perceived Common Disabilities And Disadvantages Of Average Old Men. They are listed below.

- The old can become more and more sensitive with age; are hurt easily and can become irritable.
- They tend to live mostly in the past; not so much in the present and still less in the future. They often forget that they can be big bores to others due to obsession with the past.
- They tend to retain the craving for sensual pleasures without the capacity to satisfy them.
- They may not adjust easily to younger generation and have a tendency to feel neglected. They find it difficult to cope up with generation gap and fail to create a space for themselves.
- They tend to be physically and psychologically dependent on others and short in confidence.
- They are less likely to realize that respect has to be earned and not demanded. They tend to indulge in a variety of expectations and if not fulfilled can become miserable.
- They tend to lose capacity to innovate, imagine or adjust. They tend to think in a groove. Their blind faith in experience is

Cont... on Page 05

**With
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Compliments to
AISCCON NEWS**

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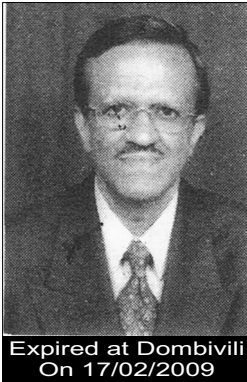
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Dr. R.M. Bhat, (1943 - 2009) - A Personal Tribute



When I read about the condolence meeting for Dr. R.M. Bhat in the Times of India of 21-02-2009, I was very sad. A few years of contact with him in the field of gerontology & geriatrics floated before my eyes. I particularly knew him & his work between the years 1980 through 1985. He was the one main person who held the first conference of FESCOM in 1980 at Dombivili in Maharashtra. I was present there. Late Shri. Vijay Merchant, cricketer, social worker and mill owner, inaugurated it. It laid the foundation of the flourishing present day FESCOM. The conference was held under the auspices of the Rotary Club and till the end, Dr. Bhat was a staunch supporter of the Rotary Movement.

Dr. Bhat had been a man of many facets and each facet unfolded one after the other. Sometimes the facets unfolded collectively and had a gestalt effect. There never was a dull period of social inactivity for Dr. Bhat till the last few years of his life. During his medical education and residential posts, Dr. Bhat had been a prime organizer of the agitation for a better deal for the housemen and R.M.O. s till then thriving on a pittance and poor living conditions.

Later, he got himself interested in horticulture. Roses were a passion with him. Many a rose show had his expert organizing ability behind their success. In fact there was nothing that did not blossom under Dr. Bhat's caring touch.

My work with him was confined to the field of gerontology in which I was pursuing a doctorate. He had come to the office of international Council on Social Welfare, (ICSW) and met my senior colleague Dr. S.D. Gokhale & myself. We held a press meet for the ensuing first FESCOM conference, later to reach multitudes of people working with the older population. On all India level, another conference where I saw Dr. Bhat make his mark was at Benaras in the early eighties. He spoke on the clinical side of ageing. Going by train, took a lot of time from his flourishing medical practice but he did not mind it.

For the Pune conference at the Karve Institute of Social Service which was my last organizational effort at I.C.S.W. in 1985, he drove down from Dombivli, gave a talk and left soon after leaving an indelible imprint of his own.

It was his sheer humility that together with Dr. S.D. Gokhale a first ranker in the field of ageing and myself, he called his gurus.

I was indeed pleasantly surprised when a few years ago, together with a few of his Rotarian companions, he paid me a visit at my home in Palghar.

It is very sad that we lost him at a comparatively young age but true to the book he wrote, he added life to the years rather than the other way about !

Dr. Mrs. Chandra Dave

their biggest handicap.

- They are too body conscious; losing capacity to see things as they are but have coloured vision.
- They develop a tendency to wallow in misery and forget that they have the capacity to brighten their surroundings.
- Lonely couples or individuals have problems of safety and security.

Let us now examine the Potential and Advantage Old Men and Women.

- Their asset is their leisure and the opportunity they get to indulge in their hobbies and do things they could not do earlier.
- They can play with children or grand children, theirs or of others.
- They can help their family in small chores and give moral support to youngsters. They can be of special help when youngsters are away from home, to the extent possible.
- Some introspection will be helpful. To cut out superfluous indulgences, reduce desires and expectation, to be more tolerant, helpful and to develop positive attitude.
- Jealousy and envy have no place. The old should assess their own essential needs and provide for them with minimum dependence. They have to create their own space in consultation with youngsters.
- They should treat their children as equals, adults and friends and give them due respect and love. They can spend more time in prayers, do meditation,

Pranayam and read books on holy saints. Walking and keeping contact with nature will keep them healthy and cheerful.

- Consulting youngsters will be helpful as they may have better solutions to problems.
- Doing creative work, working in the garden, solving problems, crosswords, etc will keep them fresh.
- One should think good, be good and do good. Old age is a time when one can choose to live for others. 5-10% of one's income or assets can go to selected charities.
- Capacity to love all is a great asset. Never grumble and always think positive

Concluding Observations; Older people above the age of 65 is the fastest growing segment of population all over the world. There are 9 crores of old people in India. It is to be appreciated that senior citizens of twenty-first century middle class are financially much better placed than before and are much better organized. They enjoy much better facilities than before in many areas. They have better opportunities for spending their leisure time outside their own home. They can enrich their life while being useful to our society.

With proper attitude, senior citizens can live a happy, healthy and useful life. Growing old gracefully will involve introspection, identifying and assessing their own weaknesses and deficiencies and accordingly adjust their life style with a positive attitude leading to harmonious family life.

Guidance from Geeta



Aā`mg`mō`HōZ MōZm
Znī`Jm`Zmī&

na`\$nē\$S(Xī`\$`mV
nmVnZmV`Z'&&

*Keeping the mind
from wandering
astray,*

*Only by single-
mindedness,*

*continual striving and Meditation, O Partha,
can one reach the supreme spirit.*

To preserve God as the only theme in the mind at the last moment of your life, you have to indulge in a life-long and ceaseless meditation on God. Your heart and his name should be inseparably woven. Only when such total absorption is achieved, can your striving attain the height of the yoga. Your mind should not wander. Study means single-minded contemplation. Mind has an innate tendency to wander away-Lord warns once again.

Such continual contemplation leads the devotee to the highest state. He meets the Supreme. Such meditation, contemplation and advertence should continually pervade your life. Chanting the name of God should synchronize itself with breathing. The name of God should make your mind synonymous with the spirit.

Just in order to discipline and shape the mind, and, to awaken the strength within it, Samartha Ramdas composed "Verses of Mind."

If the name of God doesn't dwell on your lips,

how can you hope for salvation ?

Continuous as the flow of oil, the name of God should endlessly chime within the heart.

Unabashed in ridicule from all,

be engrossed in chanting the name of

God

God is thirsty of love.

The 'Remembrance Yoga' is the real yoga of the Geeta.

**Courtesy : Shri V.V. Chiplunkar
Aurangabad**

Mrs. Kanchan Y. Shinde brings glory to Senior Citizens

Patron of AISCCON and life Member of AISCCON News. Mrs. Kanchan Y. Shinde from Bhandup (W), Mumbai, who is an energetic activist in Senior Citizens Movement has added one more feather to her Cap.

On the occassion of WORLD WOMEN'S DAY on 8th March, 2009, she was honoured by Dr. Shubha Raul, Mayor of Mumbai, in recognition of her social work, with a trophy and Citation. Mrs. Shinde was receiptent of many awards and honours in the past for her untiring social work from FESCOM and other organisations.

KUDOS to Mrs. Kanchan Y. Shinde.

Mg. Editor

One Chance

Sometimes you get only **One Chance**

One Chance to put aside your pride and say humbly;

"I was wrong," or "It was all my fault," or even

"We were both foolish."

One Chance to explain a misunderstanding that, if ignored, would sour a friendship.

One Chance to hear what another needs to tell you.

One Chance to defend a friend when slighting remarks are made against him.

One Chance to accept a shy but sincere offer of friendship.

One Chance to stand up and be counted when you don't agree with the crowd.

One Chance to say "No!" when it is important to say, "No!" but easier to say "Yes!"

One Chance to refuse to be talked into doing something you know you shouldn't.

One Chance to choose the right road when you come to crossroads in your life.

One Chance to stand up and face a hard situation instead of running away from it.

Sometimes you get only that **One Chance !**

Age Triumphantly By Plan - Dr. Harbans S. Juneja

Life is a beautiful process of physical growth, intellectual development, and maturity of thought and action that deciphers a person as a child, adolescent, youth, middle-aged, or old. Life begins in the mother's womb with the capital outlay, "zygote", formed on the investments of the father and the mother. The zygote is the total sum of the entire plus and minus genetic contribution of the parents to their offspring. These genetic endowments from the parents charter one's life history of growth, health and diseased conditions through different phases of sojourn on the earth. It is not clear whether the longevity of life is determined by a single or a group of genes inherited from the parents. But, we know for sure that aging is not a simple, single track growth process. It is multifaceted : involving physiological, environmental, social, cultural, economical and emotional components.

It is not possible to define old age in relation to a certain fixed physiological, biochemical or biological criterion or criteria. Old age has been arbitrarily defined with respect to the age at which government and industrial workers are eased out from work force with full monetary benefits and life savings. In India a government employee retires at the age of sixty. The government renders a person job less because at that age the individual is not fully productive; physiological processes have slowed down; the individual is unable to concentrate on a job; is less agile; has tendency to forget things, lacks co ordination, extra-skill and speed to complete complex tasks. Old age then is the life period immediately before and after the retirement age. It is not clear what time intervals before the retirement age should be included in the definition of old age.

Three decades back the age of retirement was 55 years while, the life expectancy was 42 years. Arbitrarily, we may define old age as a period in life from the age of 55 years till death. The current life expectancy in India is 65 years. The progressive societies proudly refer old people as 'Senior Citizens'. Children and senior citizens are pampered with special privileges because children are the prospects of brighter future while oldies have been the brick-layers and trend setters of the present.

It is difficult to assess what makes a man behave as an old man, or a woman as an old woman. Some of us who are in our seventies or above may reminisce of the old age then. A few of our elderly, not confining to any particular strata of the society, were in full command of themselves and of the household. The old age in them was a mark of emotional bondage with the family and the community; demanding respect, confidence, sharing of love and trust. These individuals were enthusiastic, busy like a bee, and were source of guidance, inspiration, emotional support and comfort. They were without formal education; but were ingrained to a stringent life style, dietary habits, with strong emotional and spiritual maturity. They tutored themselves with their own personal experiences.

Most of our elderly were the people with wrinkled luster-less skin, stooping back, unable to walk upright without a lathi or a walking stick. Senior elders were often bed ridden with bone fractures, painful rheumatic joints, swollen feet with edema, etc. The old persons were the people with gray or graying hair; with few or no teeth to masticate; failing vision due to cataract, unable to read clearly with ease; hard at hearing; unable to

concentrate on a job; unable to talk loud and clear; the loss of memory with increased frequency to amnesia; very garrulous in nature; the loss of sexual desire or libido; afflicted with some debilitating sickness, etc, etc. Elders, in general, dressed up soberly, avoided gaudy and flashy clothing, mostly confined themselves to a room or a corner of the house and spent their time on religious chores. The life of the elderly seemed monotonous, without a purpose and redundant.

The general physical manifestations of old age in our seniors were the wrinkled skin, change of hair color to grey or white or loss of hair (or both), reduced abilities to hear and see, loss of reaction time and agility or reduced ability to think clearly or recall memories.

In the present day of upwardly mobile families, with a decent or high income and affluence, the old age is virtually devoid of all the negative attributes. It has become more dynamic, more full filling with more positive alternate that make an old person behave more like a matured young person on the thresh hold of a rejuvenated life. All this has become possible because of change in socio economic conditions of the society; increased literacy; increased awareness of the accessibility and affordability of the medical help and intervention. There is over all improvement in the nutritional status, the need-felt adoption to a particular life style and dietary habits, control of environmental pollution, wellness conditions and emotional quotient of the elderly citizens of this country. Sadly though, this rosy picture of the senior citizen is not of uniform pattern across the country. Senior people from the low or middle class families are still afflicted with old age vagaries and are in dire need of financial, emotional and medical help to live, survive,

and die with dignity. Over the last 3 decades, there has been a tremendous progress in biomedical research and clinical practice. We now know that:

- The physiologic functions decrease in aging.
- Aging may cause some age related disabilities and nuisances.
- Aging is not a sickness but a natural process of body wear, tear and repair.
- An aged person is more prone to falls and fractures, loss of mobility and independence.
- Age related disabilities and nuisances can be obviated or circumvented by changes in life styles and dietary habits.
- Changes in life styles and dietary habits have increased the life span of a man by about thirty years.

So, in the modern times, aging may be viewed as a challenge to live an honorable productive life, with no room to despair for any age-related disability or, loss of self-respect, self-reliance and ego. You may ask, "What are the ingredients to age triumphantly by plan". Well, the answer is simple: *Adopt life style and diet that suits your work culture, body frame and constitution.* That this suggestion is workable and practical may be gauged from a leaf from the life history of our Prime minister Dr. Manmohan Singh. He is 76 years old, he is diabetic, and had undergone a by pass surgery for cardiac problems. He has been managing the administrative affairs and politics of the country efficiently, without any visible health problems. Just two weeks back he underwent a redo by pass surgery for the cardiac problems again. The surgery was successful. He is already back home from the hospital, recuperating to resume the challenges of Prime Minister Ship. All this was possible because the Prime Minister had a very self disciplined life style and dietary habits. Let's begin the journey through old age with a determination to lead a balanced, self-disciplined life style.

WAKE UP CALL TO SENIOR CITIZENS FOR 2009 ELECTIONS

Like millions of Indians, our Senior Citizens are also probably disgusted with the politicians who are now running the Centre, States, and local Municipalities. We know that many of our so-called 'Netas' are thoroughly incompetent. This dark picture may put you off from at all voting in the April-May Elections as you may feel there is no use in voting or what is worse vote for the very same type of candidate, with another name, as you might have done in 2004.

My message to you dear Senior Citizen, is that Netas all over the world show the same corrupt qualities as our own –be it in Japan, Korea, Pakistan, France, Italy, USA or any other country. It seems that Corruption is in the DNAs of politicians! If you doubt it, just read Barack Obama's Autobiography "Audacity to Hope" and you will know the ugly truth of present day politics in USA.

O.K., they are corrupt, but are our representatives doing the work for which they have been elected? The shocking truth is that more than 40% of Lok Sabha MPs have either never attended or very seldom attended Debates and only come in to vote for /against a Bill depending on the Party Whip. Most of the MPs have never raised your issues like overcrowding in local trains,, closure of small industries or suicide of farmers. Where were your MPs or MLAs when less than a dozen terrorists massacred innocent men, women and children for three days in November,2008? Has your friendly 'Neta' done anything about

terrorism, unemployment or price rise?

Friends, the most important General Elections of our Republic will start from 16th April,2009. Can we help to bring about change in Governance? Yes, you and I can.

Here is what you have to do make your vote count.

Rule No.1: YOU MUST VOTE-- BUT FIRST COLLECT INFORMATION.

Rule No.2: Do not give your vote to please your friendly neighbor, friend or under pressure from candidates or vested groups.

Rule No3: Study the background of the CANDIDATE , Not his Party. Do not vote for any undesirable candidate.

Rule No 4 Discuss the candidates in your constituency in Senior Citizen Meetings and similar groups and try to arrive at a consensus candidate unitedly.

Rule No.5: Enquire about the Pune based Professionals Party of India(PPI) who are working to organize middle class citizens like us and challenge the present scenario. You can find out about PPI from www.ppi.net.in or from General Secy. PPI, 302 Noble Residency, New Era Society, Market Yard, Pune 411037. If PPI has put up a candidate in your constituency, find out about him and decide if he deserves your valuable vote.

In conclusion, please remember that this time, Urban votes will have a great weightage, if we all exercise our Right to Vote wisely.

(S.Ghoshal), Mira Road (E)

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A Meeting of BCPC was held at Bahai Bhawan, Srimant Madhavrao Sindhia Marg, New Delhi on 1st October 2008 from 10 a.m. to 4.30 p.m. Almost all the office bearers of BCPC attended the meeting.

The UPA Govt. decisions on the recommendations of 6th CPC were discussed at length. The Dearness Relief issue was criticised by almost all the delegates. Com Ramankutty (Kerala) presented a detailed paper on this issue, showing how the Govt. has cheated us.

the reasonable stage is from 70 onwards, For grant of additional pension for aged pensioners and family pensioners. The maximum casualty occurs between 65 and 80 years. We should continue our fight to get this addition to pension/family pension from 70 onwards.

Commutation of pension should be restored after 12 years as recommended by 5th CPC. The Govt has refused to divulge their reasons for rejecting the 5th CPC recommendations. We will pursue the case.

Gross injustice has been done to the entire Central Govt Pensioners of 86 base i.e. pre 96 base. This will be pursued.

The Financial Position of BCPC was also discussed. It was decided to raise the annual contribution of Pensioners Associations affiliated to BCPC from Rs. 300/- to Rs. 500/-

The Booklet brought out by BPS was appreciated. Also the paper presented by Sh. V.S. Jolly, based on Media Reports, was appreciated.

Comrade S.K. Vyas (Delhi) & Comrade Y.N. Shashtri (Secunderabad) were elevated as advisors to BCPC.

(Courtesy - Pensioner's Friend)

Response of the Government of Andhra Pradesh To the National Policy on Older Persons

By Dr. T.V.S. Rao, Visakhapatnam

The Government of Andhra Pradesh constituted a State Council for Elders with a view to monitor the implementation of the provisions of the National Policy of Older Persons (NPOP) declared by the Government of India in 1999. The following discussion gives the status as of June 2008 and suggests the future steps to be taken by the Government. The provisions come under several broad subjects.

I. Shelter and Recreation

1. A separate Grant-in-Aid committee was recommended to process the proposals of NGOs for establishing old age homes. Government issued G.O.Ms.No.22, WD CW & DW (DW.A1) dated 3-9-2007 constituting a committee with the President of FAXPSCO, President of Help Age India and a member of Heritage Hospitals as members. Further orders were issued to constitute an inspection Team and time-bound schedule for sending grant-in-aid proposals. The State Government decided to take up a comprehensive exercise to assess the functioning NGOs who have obtained Government aid. This job also is entrusted to the above mentioned committee.

2. The NPOP proposes to extend help for establishing old age homes and day care centres. The Maintenance and Welfare of Senior Citizens Act 2007 also mandates the establishment of old age homes. It was decided to establish day care centres / old age homes to be managed by NGOs. The committee mentioned above recommended fresh proposals. The Government also submitted proposals for establishing integrated homes for older persons where children's homes are already functioning. Men are not allowed in these integrated homes as these institutions are meant exclusively for females. This is inadequate since we need homes that would house elders of either gender. Therefore in addition

to the integrated old age homes proposed by the Government, it is necessary to establish old age homes for both genders of elders in every district headquarters under the provisions of Act 56/2007.

3. So far as day care centres are concerned, the State Government is agreeable for utilizing unused municipal community centres by NGOs for establishing day care centres. It was said that in Hyderabad about 50 such community halls were being handed over on the 1st July. If any such community halls are identified by NGOs in other places the Government will examine the possibility of instructing the Municipal authorities to hand over such place for establishing day care centres.

II. Health care

1. The policy decision to extend health care at affordable cost to older persons comes partly under the Central Government and partly under the State. While insurance coverage for older persons is the function of IRDA, the State Government can take measures to provide convenient and effective health coverage to senior citizens.

2. The State Government has the Rajiv Arogyasree programme covering BPL families. It can also be extended to the older persons above the poverty line middle class category.

3. No progress is made on the recommendation of forming separate queues for senior citizens in Government and local body Hospitals. This provision is essential and the Government is obliged to implement this provision as it is mandated in Act 56 of 2007. The Government may be requested to adopt a camp approach where at least one medical camp is conducted in a month for older people with related specialist in attendance.

4. The government stated that steps are being taken to provide free ambulance service to older persons. It was suggested that the 108 services can also be used.

5. Regarding setting up of a National Institute for Research in Ageing, it is understood that the Government of India have already decided to establish two centres in Delhi and Chennai. However, the Government doesn't mind addressing the GOI to establish another institute in Hyderabad.

III. Food, physical and financial security

1. The Government said that all eligible persons are covered under the Annapurna scheme to get free rice. Care may be taken to ensure that the scheme covers every older person under BPL category.

2. The Government stated that the old age pension scheme is being implemented for persons aged 65+ who are below the poverty line. It is understood that the State Government is paying a pension of Rs. 200 only in order to achieve maximum coverage under the scheme. It was stated that pensions are being disbursed on the 1st of every month and the procedure was streamlined to disburse pensions through self help groups since older women are already part of women self help groups.

3. The NPOP suggested the establishment of a Welfare Fund for senior citizens. The Government stated that the Heritage Hospital is already receiving funds from the Chief Minister's Relief Fund for treating elders at concessional rates. The recently launched Arogyasree scheme will also benefit older persons. The welfare Trust that is proposed to be created for senior citizens will include both the Government and NGO'S.

4. On the request of the senior citizens' associations. ID cards are being issued by the Assistant Directors. DWDSC in all the districts.

5. The help line programme for elders AASRA, which exists in Hyderabad, should be extended to all District headquarters. The Government agreed to this proposal

6. It is necessary to fix up response time for attending to distress call from senior citizens. The Home department said that the response time is minimal and there are no problems.

IV. Maintenance of Parents and Senior Citizens.

The benefits of Act 56 of 2007 will not become operational until the State Government notifies the rules under the Act. The Government assured that tribunals are going to be established to settle claims arising under the Act. Government will be framing rules under the Act shortly.

V. Road Travel

The APSRTC is introducing a few buses in Hyderabad with in-built design to provide easy entrance and exit for safety of senior citizens. If these buses prove successful, they will be introduced in other cities also progressively. The Government feels that it is not possible to extend concessions in APSRTC bus fares for senior citizens since this burden has to be borne by the State Government and they are not in a position to bear the burden.

VI. Miscellaneous

1. It was decided that an optional programme may be started for pre-retirement counselling to all Government and public sector employees three months prior to their retirement. The Government reported that Dr. MCR HRD is providing necessary pre-retirement programme and counselling in Hyderabad. It may be useful if such a programme is extended to the districts also to benefit a larger number of retiring employees.

2. It was decided to strengthen the Career Bank available in heritage hospitals which is meant to enable the utilization of rich experience and expertise of older persons. It may be necessary to extend the scheme to other regions of the State. Or else, Government should favourably view NGOs' request to establish such banks under the Integrated Programme for Older Persons, dated 1-4-2008.

3. The GOAP has changed the nomenclature of the department as: Department for the Welfare of Disabled and Senior Citizens.

4. The Government has also accepted in principle that District level Councils for elders should be set up in every district under the Chairmanship of the District Collector to decentralize the supervision of implementation of the NPOP.

Letter to the Editor

To,
The Editor

Aiscon News Mumbai

Please refer to your call to senior citizen organisations under the caption "A Golden opportunity" in Jan.09 issue.

A cursory look at the terms and conditions for the sanction of various welfare schemes under In-tegrated programme for older persons would show that almost none of the varistha sanghas in Maharashtra or in other states would be able to take advantage of schemes in their present forms and within the time schedule. If the main objective is to improve the quality of life of older persons as mentioned under aims and objectives, AISCCON and State Federations should invite senior citizen organisations and other bodies working for the welfare of elderly to inform their necessities. They would vary widely from region to region and in rural and urban contexts. For rural development this system is planned through Gram Sabhas and Panchayat Raj institutions. Necessities communicated are to be discussed by State Federations and AISCCON and then submitted to the Ministry of Social Justice to amend the present schemes suitably. As in many other schemes like promoting cooperative societies in 1950 or AIDS Polio and Cancer awareness campaigns, Government should take initiative to promote the schemes with the active participation of older persons and other organisations at the grass root, since no elderly organisation is having expertise or experience of running schemes mentioned in the Integrated programme.

In the shorter period available the

Federations should tap the existing infrastructure like Charitable Hospitals, Research and Advocacy centres, Municipal corporations, Athashree Foundation and Helpage India assisted centres etc, Reports appearing in AISCCON NEWS also refer to some organisations like Sneha Sandhya in Vishakapattanam (A.P), Day care centres in Andhra, Gujarath, Maharashtra etc. who are running them on their own. They need to be tapped. Bureaucratic hurdles cannot be passed over unless Federal bodies take interest, recommend and then follow them up. Since Federations / AISCCON are registered and working for more than 2 years some budget provision should be available at State level so that schemes on miniscale can be undertaken.

S.S. Raichur, Pune

Dear Editor,

Sub: Extra ordinary Help to Senior Citizen from Help Line of Delhi Police.

I had sent Rs 336 by cheque to India Today Book Club, B-47 Indira Enclave, Neb Sarai, New Delhi 68 on 21-10-08 for 2 books as per their letter & Monthly Magazine- Books Today, one book at normal price and second at concessional rate of Re 1 only. In spite of repeated reminders through E/Mail, books were not sent for a long time of 4 months. I complained to Help Line of Delhi Police, P.B. no. 171, GPO, New Delhi-1 on 2-2-09 by ordinary post, which might have been received by them after quite some time as per present trend of delivery of our postal department. On 22nd Feb, Shri Munesh, Constable talked to me from Delhi on phone and inquired about my complaint. Within one hour of

his talking, some one from India Today Book Club talked to me on phone that I have complained to Delhi Police for which he apologized for inconvenience and promised to refund the full amount immediately, as they were not having second book. Shri Munesh from Delhi Police again talked on phone on 25-2-09 to inform that cheque is issued. Cheque for Rs 336 dt 23-2-09 was sent by them promptly after 4 Full Months from date of my payment and for which, I had to remind them several times!!

From this case, senior citizens should take care in dealing with all parties offering concessions/sale etc and not hesitate taking help from Help Lines of Police Department provided for our Help. Prompt Action taken by Delhi Police is very laudable. I am thankful to Police Commissioner & Delhi administration for providing such prompt Help to Senior Citizens.

With Best Wishes,
(M.V. Ruparelia)

Ph:28123691 M:9821732855.

Arrears of Pay Commission- Income Tax Relief: M.V. Ruparelia

Most of the Pensioners might have received 40% of arrears due to revised pension from 1-1-06 or date of retirement thereafter. If any one's Total Income including income from other sources etc during the current financial year 2008-09 (A.Y.2009-10) goes beyond the exempted limit plus his investment limited to Rs. 1 lakh, he can get relief by showing the arrears of each financial year from 2006-07, as chargeable to that year by filling in the form no. 10E of Income tax Act, as illustrated below. This is admissible to all employees, whether serving or retired,

irrespective of age.

Form No. 10 E (This can be copied & used).

Particulars of Income under Sec 192 (2A) for the year ending 31-3-09 for claiming relief under Sec 89 (i) by a Govt Employee.

1. Name & Address of employee/retiree.

2. PAN No.

3. Residential Status. (Individual).

4. Particulars of income referred to the Rule 21A of Income Tax Rules, 1962 during F.Y.2008-09 (A.Y.2009-10)

Amount of Arrears (of Salary / Pension) received.

(Details to be given separately in an enclosure)

Signature of Employee.

Verification.

Have grouse against your hosp? Health Bill gives you right to sue

Mumbai : The proposed legislation, the draft National Health Bill, 2009, hinges on "people's participation and involvement in their health issues". Accordingly, the Bill not only empowers patients by giving legal recognition for the rights, it has also spelt out a monitoring process which would involve public hearings.

For Maharashtra, the Bill couldn't have been more timely. Just last week, the state government gave legal protection to doctors against attacks and proposed an independent body for patient grievances. The Centre's Bill will give a further shot in the arm to the healthcare system.

Health activists, however, said the Bill's introduction is likely to be delayed by the upcoming parliamentary elections and that citizens should demand that it be passed at the earliest once the new government comes to power.

"The healthcare system today is near-crises and this is actually a long overdue Bill. Today, when patients go to a private nursing home, they are not told how much the treatment will cost, but get a fat bill which is unexpected at the end of their hospital stay. If you ask a doctor too many questions, he/she reprimands patients. In public hospitals, patients passively accept the lack of medicines or go outside for basic tests," said Dr. Abhay Shukla, national joint convener of the Jan Swasthya Abhiyan which was part of the task force. He pointed out that the Bill would be the first step towards mobilising the public to demand their rights which, in turn, would improve the standards of healthcare facilities.

The Bill has outlined the setting up of a National Public Health Board, as well as similar state-level bodies involving active citizens to lay down standards for public and private hospitals, review the standards as well as health policies every five years and to carry out mandatory audits of the health system from time to time.

So also, every state would be required to hold Jan Sunwais or public hearings, where citizens could publicly air their perceptions of health services, expose specific violations and take timely action.

It's not just patients who stand to benefit. The legislation has also touched upon the rights of healthcare providers. Doctors and nurses, for instance, can demand protection from exposure to infections as well as compensation in times of accidental injury.

The draft proposes that any violation of the provisions will attract a fine up to Rs. 10,000 and imprisonment up to three months. Repeated violations will result in doubling of the fine.

Source : Times of India

Confederation News

International Conference on Multi-disciplinary Approach to Healthy & Participatory Ageing.

This Conference was held from 22nd to 24th Jan, 2009 at ISKON Auditorium, Juhu, Mumbai, organised by SNTD Women's University and SVT College of Home Science alongwith ILC-I and Helpage India.

22nd Jan 2009 : The Inaugural Session started with the welcome address by Dr. Meena Godhia, Principal, SVT College of Home Sciences. The Chief Guest Prof. S. Parasuraman, Director (TISS), Dr. S.D. Gokhale, President International Longevity Centre - India, Mrs. Irene Hoskins, President, IFA, Dr. Jane Barratt, Gen. Secretary, IFA and Dr. O.P. Sharma, General Secretary Geriatric Society of India were felicitated with floral bouquets & Mementoes. Dr. Suja Koshi, convener of the conference introduced the theme of the conference. She expressed happiness that the conference was being held during the Golden Jubilee year of SVT College. The 20th century has witnessed unprecedented increase in elderly population and it was necessary that all Government and social organisations shared their responsibility for the welfare of the elderly.

In his key-note address Dr. S.D. Gokhale said, for most individuals, ageing is an unwanted yet inevitable reality. The philosophies of Western and Eastern world are quite the opposite of each other. The Western world believes that death is the ultimate end while the Oriental world believes in the perpetuity of life. Studies indicate that healthy, older persons are more apt to remain productively engaged in society through continuing work or voluntary activity and that they require

fewer health services. Nations must realise that old age will not bring about economic stagnation but rather will contribute to the wealth of nations.

Genetics, or what you inherit from your ancestors has a major influence on how you age alongwith environmental factors and life styles. On an average todays elderly are healthier than the earlier cohorts of the same age.

Science and Technology have gone to the remote villages of India but a scientific approach and attitude has not reached the people at large. We seem to fathom outward space but have failed to look within us. We have come to know how the atom is split but failed to realise how the family is retained together. Spirituality is the way of life based on 'Karma-Fala-Tyaga' or doing your duty without being attached to it. Spirituality is conceived of as a new discipline. It is called a science because it relies on hypothesis, experimentation, verification and demonstration.

The Challenge before us is to unravel the mystery of mind and to understand the chaitanya or the powerhouse that makes it possible. The emerging science of neurology and spirituality can open the doors to understand this powerhouse."

The Chief Guest, Prof. S. Parasuraman, Director TISS, said, "Now there is a fundamental shift from formal to informal sector in rural areas. 10% of India's workforce is in informal sector and they are the suffers in old age for want of income security State is investing less in health care. Women live longer as windows with little support system. Overall support available to elderly from family is at stress. The supreme Court has appointed a committee on Right to food. In their report (2007) they say the nation

musy redeem its duty to senior citizens. 'As elderly population is on increase we have to create a system which will take care of dignified life of elders. There are few advocacy organisations for elders.

In Tamilnadu elderly can go to school and get mid-day meal with children. If it is possible in TN it is certainly possible in Maharashtra. In A.P. the Govt. issues BPL cards to all needy poor. Kerala Govt. has given health care for all poor. We need to undertake innovative projects for the elderly to improve the quality of their life."

Mrs. Irene Hoskins, president IFA, present greetings to the Conference from IFA. She said 'Ageing starts before we are born and continues till we die. Healthy ageing relates to economic and social integration. Every elderly guest have an access to good health care within his reach.

Dr. Jane Barratt, secretary General IFA said, "Social Political and economic environment have their impact on ageing. The key areas for the elderly population here are changed family structural, health care at affordable cost and financial protection. I appreciate the subjects chosen for this conference."

Dr. D.P. Sharma Gen. Secretary Geriatric Society of India, said 61% of world's elderly population is in developing Countries. India has about 90 million elderly but Geriatrics was not recognised by the Medical Council of India till 1990. We need many Geriatricians and nurses with training in geriatric care.

Prof. Chandra Krishnamurthy, Vice Chancellor, SNDT Women's University who presided over the function, said 'ageing is a normal process and with medical interventions it can be regulated & made happy. NGOs should provide support to elderly couples staying alone. Public health policies need to be socially

oriented. Society has to take care of protection of the elderly and get them involved in social & cultural functions. Intergenerational solidarity is necessary for active ageing. Legislation is necessary for caring the elderly.

Dr. Khurshed Mistry Proposed a vote of thanks.

23 Jan 2009.

In the first plenary session Dr. Gururaj Mutalik, Ex. Director, WHO, spoke on concerns in health management of the elderly. He said 75% of our elderly are in villages. Elderly primary health care is absent particularly in villages. Fitness, Wellness promotion centres are acutely required. Integrated Rural Development with emphasis in water supply sanitation and education is the answer. We should begin with elderly women - the most neglected lot.'

Shri Prakash Borgaonkar, Jt. Dir, Western Region, Helpage India spoke on Elder Abuse in India and Ms. Radhika Vaidya of Athashri Foundation spoke on special Housing for the Elderly

In Plenary Session II, Dr. Ashish Contractor, of Asian Heart Institute, Mumbai spoke on cardiovascular & Respiratory Rehabilitation which are comprehensive long-term programmes involving medical evaluation, prescribed exercise, cardiac risk factor modification, education and counseling. 68% of the deaths happen in arteries with less than 50% block while 14% deaths occur in arteries with 70% block. Soft plaque has more cholesterol likely to burst. The goals of therapy are plaque stabilization and normalisation of endothelial function. Take care of the risk factors - 1) BP, 2) Smoking, 3) Diabetes & 4) Obesity. Exercise reduces the chances of heart attack by 50%. Have at least 30 minutes moderately intense physical activity every day. Exercise is antiatherosclerotic,

antithrombotic, antiischemic and anti-arrhythmic.

Dr. Charles Pinto, Psychiatrist, Nair Hospital Mumbai talked about Ageing & cognitive impairment. Dementia has about 3% prevalence in Mumbai. The management includes - stress management, treatment of anxiety & depression and diabetes. Antioxidants and Brahmi, Ashwagandha, Ginkgo Biloba are useful in small number of cases, Relaxation therapy meditation, Yoga, Music, reading, hobbies are useful. Coffee enhances memory function. Take plenty of water. Diet should be low in fat. Omega-3 fatty acids, walnuts, Kiwi fruits improve memory. Fish and exercise increase cognition & memory. Avoid fast foods. Simple food, work and brain exercises help to avoid Alzheimers.

24 Jan 2009

In the morning there were parallel session on Elderly friendly innovations. Speaking on Research in Ageing - Dr. Siva Raju of TISS said, our 60+ & population is heterogenous. Their dependency level, economic level, health level are not the same. Research in ageing in India is urban based (though 70% elderly are in rural areas), on middle class (though 60% are poor), and are pensioners (who form only 10% of elderly), & that too makes (though females are in majority). Lonely, neglected, illiterate, widowed females have many physical & mental health issues which need to be studied. Last year Rs. 10 crore meant for research went back to the Govt. unutilised. In plenary III session - Shri Ram Belwadi, IAS, spoke on policies & schemes for the Elderly in Developing countries. Dr. Irene Hoskins President IFA spoke on Global Ageing Innovations in policy & practice. She said WHO has created guidelines for public policy on ageing & health, Age friendly

primary health care, Age friendly cities and commission on social Determinants of Health. In all Countries rich or poor health & illness follow a social gradient - the lower the socio-economic position, the worse the health. Social injustice in killing people on a grand scale. Encourage older persons working longer, raise the statutory retirement age and make retirement more flexible - Ensure public pensions are adequate for those who donot have the opportunity to build adequate retirement savings accounts. Envisage age-related 'Social' pensions. Ensure protection against mismanagement endangering retirement savings. Pay special attention to the needs of older women and end age discrimination.'

Speaking on 'Role of NGOs in population Ageing' - Dr. Jane Barratt, Secretary General. IFA, said, since 1990 there is historic growth of NGOs in general, with a notable explosion of international & domestics human rights organisations. Madrid International plan of Action on Ageing calls for a more holistic perspective with new emphasis on social and economic determinants. The new international approach to advocacy being adopted by NGOs will be critical in ensuring their legitimacy and ultimately, their long-term value as a part of civil society.

The theme of the concluding session, chaired by Dr. Vibuti Patel, was 'Healthy Ageing'. Shri Ravindra Surve, IAS, narrated his personal experiences on Healthy ageing. Speaking on the importance of nutrition for healthy ageing Dr. B. Sesikeran, Director, NIN, Hyderabad, said nutrition for healthy ageing probably starts even before we are born and has to be a life cycle approach. Traditional knowledge has always stressed on healthy food habits & lifestyle

as the best bet to go through old age with good quality of life. Nutritional needs of the elderly depend on wheather the individual is ageing natrally or wheather it has been accelerated or associated with pre-existing diseases. Digestive system is most vulnerbale and influences the food intake & nutrition of elderly. Immune function is sub-optimal due to critical micro-nutrient deficiency like zinc. Use of synthetic vitamins & anti-oxidants do not seem to provide the benefits. Adequate energy, vegetable & fruit intake is still the best medicine to keep the elderly healthy.

Dr. Ashish Deshpande, Psychiatrist in his speech mentioned how yoga and exercise can contribute towards healthy aged, based on the research project undertaken by him 2 years ago in Mumbai.

Dr. S.P. Kinjawadekar President AISCCON, presented the Ayurvedic perspective on healthy ageing. Use of oil in the nostrils (as Nasya) application of oil to oral mucosa and oil massage for the whole body gives strength to the concerned organs. Proper diet in little less quantity, changing diet according to seasons, being spiritual and positive towards life, taking regular exercise and use of Rasayans like Aamla, Shatavari, Bala etc. and observing Aachar Rasayana (speaking truth, controlling anger, taking adequate rest etc.) should be the parts of our daily life style which certainly contributes to healthy ageing, he said.

In the valedictory function Dr. Suja Koshy presented the summary of proceeding of the conference. Dr. Madhu Madan, Registrar SNDT Women's University delivered the Valedictory address as chief Guest and the Conference came to an end.

Dr. Kinjawadekar

Maharashtra

" Inauguration of "ANAND-VAN" Complex of Shree Nagar Senior Citizen's Association THANE".

Thane Municipal Corporation has allotted office accomodation to Shree Nagar Senior Citizen's Association. Thane, at Municipal Water tank compound at Shree Nagar Complex. Through the good offices of our area Corporators Shri Manoj Shinde and Shri Sailesh Shinde a suggestion cum proposal was forwarded to The TMC Commisioner Shri Nandkumar Jantre and other concerned officers for Beautifying and Developing the compound area opposite our office with a platform and garden with benches etc for the use of Senior Citizen's. We were successful to get this done within a short period.

On 7th February 2009 Shri Nandkumar Jantre I.A.S., Honourable Commissioner, Thane Municipal Corporation inaugarated The "Anand-Van" Complex in the August presence of Shri K.D. Lala Chief Engineer TMC, Shri Vanketsh Bhatt additional Commissioner TMC, Shri Tukaram Shinde. Developer of Shree Nagar Complex and Honorable Corporators of TMC.

Shri Jawahar Bhatt president S.N.S.E. Association welcomed the guests and narrated the brief history, activities under taken by the Association. Shri Jantre and the other dignitaries present during the inauguration promised all the help e.g. office Accomodation, Donations. Celebration of 1st Oct. "World Elders" day Jointly and to assist in all respect to strengthew the movement of Senior Citizens in the Thane Municipal Corporation area limits.

The Function ended with a Musical Programme by Smt. Aparna Kulkarni of "Maitri group" Thane.

Jawahar Bhatt

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- 2035 VH\$Xij U E{e` nB`XenH\$ {bE ~Dw`Z OnE\$jo g_n` m

-2040 VH\$_Ü` E{e` nB`XenH\$mhmom` hr hmb
2050 aS>AbO\$H\$ndf°

- g\$ W\$amir`>gK H\$ AZw nZ H\$ Wn(nH\$2050 VH\${díd H\$m ha nmMdmBgjZ ~Dw`Hnolm` nZr CgH\$ C_«60` m BgH\$ nma hmlr & AJa g_` ahVoA{V[a°\$, g\$WmAnH\$ Vbme Zht hB°,Vno~Dw`H\$` h Am-nKr ~Zolr naemZr H\$m g~

MZn/r H\$nhnS>

- gā_mZV, ~hVa OrdZ d g_WV ndmñi` gōdm_hj m H\$anZmgaH\$anH\$ {bE MZn/r & BgVmAga AWP` dñWm na nSōm& {dH\$gerb XenH\$ {bE Z` mgH\$O>

- X{Z` m_|H\$ar~ gĠna \ \$gXr ~Dw` m Vno~ghmamhc` m n[adma goAbJ OrdZ i` VrV H\$aZ H\$ {bE {dde.

^maV_|

- ^maV_| Ag\$ {RV j ð nH\$ 90 \ \$gXr ~Dw`H\$ g_` gm_m(OH\$gmj mH\$ g_n` m

- 30 \ \$gXr Jar~r ad m H\$ ZrMq 73 \ \$gXr A{eij V Anp enar{aH\$I _H\$aZo_|Ag_W°

- 60 df°H\$ C_«goD\$na H\$ dĠ _{hbmAn_|55 \ \$gXr {dYdnE\$

AnH\$S\$_|~Dw`°

- ^maV_|1991_|N\$ H\$anS>~Dw`Wq 2001_|gnV H\$anS>gnr>bml d 2021_|13 H\$anS>gĠna bml hnZdH\$ Ca_rX.

- X{Z` m_|60 df° mCggaA` nXmC_«H\$bmolH\$ Am-nKr VOr go~T>ahr hj & Bg{bE ^r {H\$ AZH\$ {dH\$gV Xen_| AngV C_«~T>ahr hjAnp ~f dH\$ nXm(H\$ dOmahd&

- ~Dw`H\$ OZg\$` mH\$ar~ gntagnV H\$anS> 50 dfn_| nmM JZm~T>ZdH\$ AmE\$H\$

- OmmZ d BQ>br H\$no~Dw`H\$mXe H\$mOmV/mhj &` hnE\$H\$ MnVnB`bm 60` mCggaA` nXmC_«H\$hj &

- O_Zr Anp`ZmZ_|24 \ \$gXr goA{YH\$ Am-nKr 60 df° mBggaA{YH\$C_«H\$bmolH\$

- AnñO\$bo` m_|2050 VH\$65 d D\$na H\$ ~Dw`Am-nKr 25 \ \$gXr hmlr &

ónV : amir` f` ghmam

àemg{ZH\$ i` dñWm_|
~Xbmd H\$ Amđi` H\$Vm

Xe H\$ AnOnKr H\$ 62 df°HnZoH\$ CnanV ^r

{~{Oe anA` H\$ ""\D>S&bn, anO H\$anb' H\$ Zr{V H\$VhV AnZnB`B`AnB`E.Eg., àemg{ZH\$ i` dñWmH\$noT mahd& g~goH\$_ {eij V _m_| JOE O>AnB`E.Eg. ~Z Xe/anA` H\$ Zr{V {ZYnAU Ed\$ {H\$ nVd{V H\$mH\$m H\$a ahmhj Ed\$ A{YH\$V_dVZ_nZ H\$mA{YH\$nar ~Z J` mhj & S` mAmn ^r Bg i` dñWm_|n[adVZ H\$~nao_|Zht gnm ahd&

AnB`E.Eg. AbJ goH\$B`HnR\$H\$ Zht hj daZm _mZmM` Z H\$ H\$RZ narj mhj {OgH\$m_Vb~` h Z\$ {H\$ dh ha {df` H\$m {defk hmoJ` m & Xe/anA` H\$ Zr{V {ZYnAU gm_m(OH\$, An{WPH\$, Y` m` H\$, ndmñi`, Ob à~YZ, H\$ f, Andmgr`, gS\$H\$ {Z_nE, Ob n[adhZb D\$OnP`CennKZ, E{d` eZ EYOr{Z` atJ dnbo ha j ð_| Andı` H\$hj Ed\$H\$B`°r i` {°\$BZ g~ {df` nH\$m {defk em` X ^maV_|hr hmoG\$H\$/mhj OnaE` H\$ {df` H\$ Zr{V` n\$ ~ZmZdH\$m {ZU° bogH\$V/mhj & EH\$ AnB`E.Eg. B{Vhmg` m g_nOemó` m anOZr{V H\$m JOE O>hj Vmddh gaH\$na_| g{Md ~Z C°\$ g^r {df` nH\$ Zr{V {ZYnAU H\$goH\$a gH\$V/mhj S` nH\$ dhr g{Md AnO ObXm` _ñnb`_|hj,

H\$ b dhr g{Md nđmĩĩ` _đĩ mb` _|hĩ Ed\$ nagĩĩ l nZ` m
 AY` _đĩ mb` n|_|h mĩ mĩ BZ g~H\$ CnaniV ^r` og{Md hr
 ~nđĩ nĩ pĩ bH\$ gđĩ WmZ Ed\$ g{V` n|_|^r gđĩ gđĩ Zm{X` o
 Onlvohc Ohmĩ Xnĩ har, {Vhar` mH\$ B{Oĩ _đĩ nĩ a` nđĩ ^r gĩ nĩ Xr
 Onlvr hĩ cĩ _mZĩ "EZ AZna gĩ nĩ ~r_nĩ" dĩ nĩ r H\$ mĩ dV H\$ nĩ
 M[aV mĩ W{H\$ a hĩ cĩ ZVr Om gĩ nĩ a gĩ H\$ nĩ r H\$ nĩ nĩ Ed\$ gđĩ WmZ nĩ
 H\$ nĩ S` mĩ nĩ b hĩ mĩ hĩ hĩ _Am_ OZ gĩ nĩ Nĩ mĩ hĩ AmZ hĩ hĩ _mZĩ
 JV` _| Om a hĩ cĩ R\$ H\$ Bg H\$ {dĩ nĩ rV {Zĩ r gđĩ WmZ BZ
 {dĩ fĩ k nĩ H\$ gĩ hĩ mĩ ~lĩ pĩ X` nđĩ Nĩ a hĩ cĩ {Zĩ r gđĩ WmZ BZ
 {dĩ fĩ k nĩ H\$ nĩ {eĩ U gđĩ WmZ nĩ gĩ hĩ bĩ bĩ H\$ nĩ nĩ b nĩ bĩ O
 X bĩ S` ~lĩ pĩ X` nĩ nĩ a hĩ cĩ

AnO nĩ nĩ b nĩ B Oĩ EZ H\$ O_mZĩ _| hĩ {dĩ fĩ H\$
 {dĩ fĩ k _nĩ pĩ hĩ cĩ Onĩ AnZĩ j d _| H\$ nĩ H\$ Vĩ hĩ o H\$ nĩ S`
 AZĩ d ^r ã mĩ H\$ Mĩ mĩ hĩ H\$ nĩ BZ H\$ _{eĩ j V g{Md nĩ H\$
 AYrZ H\$ nĩ H\$ Zmĩ nđĩ a hĩ hĩ Onĩ Xĩ e H\$ nĩ Xĩ nĩ hr H\$ nĩ
 Onđĩ mĩ _ AV: A~ g~go H\$ _{eĩ j V H\$ nĩ A{YH\$ V_
 dVZ_mZ XZĩ H\$ nĩ H\$ nĩ B{Anĩ Mĩ E` Z hĩ hĩ dāZ` i` dñWm _|
 n[adVZ H\$ Andĩ` H\$ Vm hĩ hĩ S` nĩ H\$ nĩ hĩ b{dĩ fĩ k nĩ H\$
 H\$ _rWr b{H\$Z A~ EgmZ hĩ hĩ

gaH\$ nĩ _|H\$ S{Z` _nĩ H\$ VhV H\$ nĩ H\$ Zmĩ nđĩ Vm hĩ;
 g` Z hĩ _bV m hĩ AV: CZ H\$ nĩ nĩ H\$ nĩ gĩ nĩ P H\$ Z hĩ nĩ ~nđĩ
 ~mĩ nĩ pĩ bH\$ gđĩ WmZ / g{V` m~ZmXr Onlvr hĩ cĩ Onĩ a gĩ H\$ nĩ
 H\$ AYrZ H\$ nĩ H\$ Vĩ r hĩ cĩ _mZĩ Onĩ H\$ nĩ gĩ a H\$ nĩ _| a hĩ H\$ Z hĩ
 H\$ gĩ H\$ Vĩ hĩ cĩ d~nđĩ H\$ AbJ nĩ dā H\$ VhV H\$ bĩ Vĩ hĩ
 S` nĩ H\$ _oAnĩ B{E.Eg. Xnĩ nĩ hr OJh gđĩ gđĩ Zĩ hĩ o hĩ hĩ
 Ed\$ gaH\$ nĩ r gđĩ WmZ AnZĩ Cĩ Oĩ` H\$ nĩ V{g{V` b Z hĩ hĩ nĩ m
 a hĩ cĩ

AnO Anĩ B{E.Eg. nĩ r m _| JOĩ E O H\$ gĩ nĩ W nĩ nĩ O
 JOĩ E O Eĩ Or{Z` a, S{ĩ S Oĩ Ed\$ AY` {dĩ fĩ k ^r {hĩ gĩ m bĩ

ahĩ hĩ cĩ {Og _| 70-75 ã{Vĩ V H\$ BZ {dĩ fĩ k nĩ H\$ nĩ hr
 gĩ bĩ cĩ EZ hĩ mĩ hĩ hĩ H\$ nĩ U nĩ nĩ V: AnZĩ dĩ nĩ ^_mZ H\$ a j m
 H\$ Xĩ e gĩ dĩ m H\$ nĩ Oĩ ~m hĩ hĩ ãĩ eĩ g{ZH\$ gĩ Vĩ nĩ Amĩ nĩ _{Og _|
 Bĩ Vĩ r H\$ nĩ ~m bĩ ~m bĩ hĩ Bg gĩ o{dM{bV hĩ nĩ BZ Anĩ B{E.Eg.
 nĩ r j m Anĩ nĩ a {g{Vĩ nĩ OZĩ rV eĩ nĩ, B{Vĩ mĩ g, g_m Oĩ eĩ d
 AY` _mZĩ d{dĩ fĩ nĩ H\$ nĩ hr _nĩ Vm Xĩ a hĩ hĩ Onĩ Xĩ e H\$ nĩ nĩ r Nĩ
 Tĩ H\$ bĩ Zĩ H\$ gĩ nĩ Oĩ {Xĩ Vĩ hĩ hĩ

AV: {~{Oĩ e H\$ nĩ r BZ Anĩ B{E.Eg. gĩ rV ^Vĩ
 H\$ nĩ ~H\$ Zĩ H\$ Andĩ` H\$ Vm hĩ Ed\$ n[adVZ Adĩ` ^mĩ d
 hĩ nĩ J` m hĩ hĩ Anĩ B{E.Eg. gĩ bĩ cĩ EZ gaH\$ nĩ _| m{Zĩ r
 gđĩ WmZ nĩ _| gĩ dĩ nĩ V{dĩ fĩ k nĩ {Oĩ hĩ 15-20 dĩ fĩ H\$ nĩ AZĩ d
 nĩ Amĩ hĩ nĩ J` m hĩ nĩ _| gĩ a nĩ b Bĩ E S` mĩ nĩ Vĩ a nĩ H\$ S` nĩ r j m
 nĩ O{V AnZĩ m H\$ aĩ E` bĩ S j d H\$ Andĩ` H\$ Vm Zĩ gĩ m, ãĩ E` bĩ S
 j d goAndĩ` H\$ Vm Zĩ gĩ m gĩ bĩ cĩ O{H\$ oĩ Onđĩ Ed\$ Bĩ Vĩ hĩ Xnĩ har
 ~m AZĩ bĩ S nĩ bĩ S{Oĩ _đĩ nĩ a` nĩ gĩ oĩ a l m Onđĩ V^r hĩ Xĩ e /
 aĩ A` nĩ H\$ nĩ Cĩ b{V H\$ {eĩ a nĩ a nĩ bĩ Zĩ _| g{V` b hĩ mĩ gĩ H\$ nĩ aV:
 {Z` _nĩ _| n[adVZ H\$ i` dñWm H\$ nĩ gĩ Xĩ e H\$ Zĩ H\$ A{dĩ bĩ ~
 Andĩ` H\$ Vm hĩ hĩ bĩ bĩ S g^m H\$ Mĩ Zĩ d ZOXr H\$ hĩ cĩ Ed\$
 anOZ{V H\$ nĩ nĩ Oĩ ~m Bg Ah _ _mĩ nĩ a {dMĩ nĩ H\$ Bg
 ãĩ eĩ g H\$ nĩ nĩ O{V _| n[adVZ H\$ Am_ OZ H\$ gĩ m Zĩ
 {Zĩ nĩ j, {Zĩ Mĩ b, H\$ V{Zĩ Oĩ ~m nĩ a Xĩ e gaH\$ nĩ H\$ nĩ
 ãĩ eĩ g{ZH\$ eĩ nĩ a l Am_ OZ H\$ nĩ ZU` ^r ãĩ mĩ H\$ gĩ H\$ Vĩ
 hĩ cĩ m hĩ _d[ãĩ OZ CZ gĩ bĩ gĩ ãĩ H\$ nĩ dĩ nĩ V{H\$ nĩ hĩ b H\$ gĩ H\$ Vĩ
 hĩ cĩ

g{Md, d[ãĩ OZ m[a H\$ g{V
 Bĩ bĩ nĩ Oĩ gĩ Aĩ S - 85, dZ {d^mĩ a nĩ
 Pmĩ bĩ dĩ nĩ S{anO} 326001. _m 9414330036
 gĩ m^mĩ : dñZĩ ãĩ Wr, d[ãĩ OZ m[a H\$ gđĩ WmZ,
 anO ãĩ nĩ WmZ H\$ _m{g H\$ nĩ {ĩ H\$ nĩ

I r VlogrXng H\$m _mZg

I r VlogrXng Zo am_ M[aV _mZg aMzm H\$a
AnZr bd Zr H\$ gnW-gnW H\$dVmH\$no^r Yÿ` Yÿ` H\$a
{X` mîk

H\$dVmH\$a H\$Vlogr Z bgo & H\$dVmbgr nm
Vlogr H\$ H\$bmîk

AWm² H\$dVm H\$aH\$ VlogrXng H\$ em^m Zht
daZ`nd` \$H\$dVmhr CZH\$ H\$bmnnH\$a em^m _mZ hmoJB²
Ohnag_nO H\$no_mZg goknZ, ^{°\$ H\$ _{U _nî/r {boVno
gr(hE` H\$nohOnanî Z` oeâX VWmH\$d` nî H\$noAZbt\$ N\$YX,
gnW hr {OkrguAnî H\$no AZbt\$g_g_nî/nZ Vno ^°\$nî H\$no
EH\$YH\$a_nO_mîk

O~ _rame-nB²q CZ na _dnS>H\$ anUmUnam{H\$ o
OmahoAË` nMna goNêH\$amnmZdH\$ {bE _mJXeZ MnhmVno
VlogrXng Or Z{bI m

{OZH\$ {â` Z am_dXhr, VO` dVnB²H\$no>ar g_
OÜ{n na_gZhr &

{nVmVÁ` mähbnX {d^rfU ^nB²,^aV _mVn[a

nî {bVchr _rame-nB²qodYXndZ H\$mao ^{°\$H\$m
anO_mîkH\$S>{b` m & dhm-OnH\$a anZr {JaYa H\$ ào
{XdmZr ~Zr & ^{°\$_|bdblZ hmb\$â UmaH\$nyre OnZona Vno
_fV²|hr {dblZ hmoJB² ^°\$Ano ^JdmZ EH\$H\$na hmoJ` o
& {hYXr OJV H\$no CÊH\$` ^{°\$ gr(hE` H\$ gnW-gnW
VlogrXng ZobnH\$ ^mfM H\$no C_f nVnZ {Xbmî m & dX,
Cn{ZFX²Am nannUnîH\$ngna bn{H\$H\$eâXnî_|àJO>{H\$ mîk
{Zaj aî` ^{°\$^r {OgogîZ-gîZ H\$a JnZdoJmVWmJmV+JmV o
H\$ERâW H\$a gXmH\$ {bE _mZg noJb na A\$H\$V H\$a {b` mîk
EH\$ ~hV ~S&M_EH\$na a_M[aV _mZg ZoH\$a {X` mdh hj

_nareg, \sOr, {JZr An{X An{X OnnuAnî na boOnH\$a
~gmî w` uAZnT>Aghmî _OXanîH\$no5-6 nr{t> nî~nK ^r
am_ ^°\$ {hYXyH\$ê\$ n_|hr ~MnH\$a aI {b` mîk A~ dhmH\$a
ñdVî ^f_ na nT&~{bI mdht ^maVd&er naVviam_ Jbm_
(ñd.S&am_Jbm_) _nareg H\$ amî & {V H\$ nX H\$ em^m
~T&MMH\$hj&

àg\$de CZ g~ H\$ H\$e\$U H\$nmZr ^r AnO H\$
ñdN\$X VWm_Z_nOr nrT& H\$no` nK {XbmZmAndî` H\$hî &
Cg g_` H\$g_Û ^maV_|O~ i` mma H\$aZoH\$ {bE Ankm
_maH\$a AnB²H\$no>BpÊS> mH\$gnZr Zo` hmaH\$ anOm_hnanO
Anp Zdm-nî~nKenîH\$noAmng_|EH\$XgaogobSVoXd m
VnoAdga nmH\$a YraeYraoAnZr hr gîZm I S& H\$a anA`
O_m{b` mîk Xngar Ana A\$|OnîH\$ngm_nA` Anp Cn{Zde
gîZna ^a_|\b J` mVmi& Cÿh|Andî` H\$VmgB²AZbt\$Xenî
_|gS&H\$ Anp ab bnB² {~N&ZoH\$ VWm{ZOZ OnnuAnî H\$
O\$|b H\$noH\$a I Vr H\$amZoH\$ & V~ Cÿh|g~go_hZVr,
{dîdîV Anp YîZ H\$ n\$H\$ Anp O~mZ H\$ g_f o^maVr` hr
ZOa Amî d&CîmaàX& Anp {~hma H\$ Jar~ ^f_hrZ {H\$gnZnî
H\$noAAN& _OXgr H\$nmN\$H\$nmAmîdmZg Xbt\$â VrZ gonnM
gnb H\$ EJk_ÛO>na g_& OhnOnî_| ^aH\$a X{J Ur
A\&H\$ nî _nareg An{X VWm gîZp \sOr, {JZr An{X
OnnuAnî na boOnH\$a AnZm H\$m_ àmaâ^ {H\$ m & O\$|b
H\$noH\$a _OXanî ZogS&H\$, a&dobnB² ~ZnB²VWm I Vr H\$
`nîk ^f_ H\$noVî na {H\$ m & Jpî Jnî Omdb H\$ I Vr
àmaâ^ hmoJB² MmbnH\$a A+|OnîZo` h {H\$ m {H\$ EJk_Û>
g_mâ hmoZona ^r Cÿh|ñdX& bnZoH\$na~\$ Zht {H\$ m &
dVZ BVZmH\$_ {X` mJ` m{H\$~MV Zht hmoVr VWmbnîZdH\$m

{H\$am m^r Zht hnm m m&B{h}{Ja{_{0>m_OXp H\$hmOmVm
Wm&BZH\$ng\$-Y ndXe, g_nO Ed\$ndY_@gH\$OZongam-
ngmà`ng {H\$ mJ`m KnUr H\$~p H\$ Vah OrdZ ~rVZo
bJm&^ {dî` H\$mOrdZ A\$H\$na` Wm n[adna i` dñVw
g_má àm : Wr, _{hbnE+Zht H\$~am-a Wr & EJk_@>H\$
AZugma 3`m5 df@|dmng Ka bnQ>AnZmWm& CZH\$gnW
Nb hnmVmh\$WmAV: OrdZ^a H\$m H\$aVoH\$aVo{~VnZmWm
& D\$na goEH\$ Anp AE`nMna Mb ahmWm, C{yh|BgNB© m
_wg b_nZ ~ZnZdH\$mNb-H\$no>{H\$ mOmahmWm&

Egr {df_, H\$e\$U n[apñW{V _|^dgmJa H\$nmna
H\$aZdH\$mCZH\$nmng`{X H\$NB©OhmO WmVmdh am_Zm ê\$nr
VmaH\$_@ WmAnp g\$ VlogrXng ÜnambnH\$^nf m_|Jm o
J`oam_M[aV H\$ nX Anp XnhoOmC{yh|güVegüVo`nK ah
J`dVo&{XZ^a H\$H\$Rna n[al _H\$~nK ~ñVr H\$, Mmpnb
na anV H\$nam_Zm H\$_{h_mH\$^OZ JnZm, XnhoMmpnb©
~nb ~nbH\$a Jm-JmH\$a güZmgüZnZmhr MbVmahm&`hr
H\$_ObVmahm, VwM3-4 nr{>ñVH\$C{yh|ZoAnZoAmH\$no
{hYXyY_@go~nH\$a aI m&A~ CZH\$ AJbr nrT\$ nT>
{bI H\$a AnZoAmH\$noAmJo~T\$H\$a Jd@go{hYXyH\$ ZnVo
I S\$ {XI nB©Xahr h; &`h OmM_ÉH\$na hmo`mh;dh H\$db
Anp H\$db g\$ VlogrXng H\$am_M[aV _mZg H\$à^nd go
h|Amh; &

AnO dohr ~\$wAnZr-AnZr OSaVbmeZoH\$
{bE npl@ñH\$ÜnamgüZr ~nVñH\$nmñ_VV nO;b na YnaU H\$a
AI mfaV ZdñgoCîmaàXe Anp {-hma H\$CZ JmñH\$XeZ
H\$aZoAnVoh©OhmgH\$^r CZH\$npd@Nb-H\$no>goboOm o
J`dVo&@{dV öX` gag~gd_bH\$a^nar_Z gdnQdVdh; &

EH\$ Ana ^r _hnZ H\$ñ©am_M[aV _mZg H\$

_nÜ` _ go g\$ VlogrXng Or ÜnambhAm dh AnO H\$
AnÜñUH\$, dKñ{ZH\$ Anp d{ÖH\$`w _|anO i` dñVwH\$
gdmñm_ àñVñV am_anÁ` H\$ gñXa N\$d & {Og anÁ` _|
VrZñàH\$na H\$ VmñgoOZVmH\$noH\$NB©güVnm Zht h|Am&
G\$VwAnp Andí` H\$VmH\$ AZugma _K dññH\$aVoh; & Aën
Anñ _|^_anO {H\$gr H\$ ànÜñH\$haU Zht H\$aVmWm&
VlogrXng ZoVno`h ^r KnfUmH\$a Xr {H\$ {Og {H\$gr ^r
anÁ` _|àOmXwI nñVr h;VnCG anÁ` H\$manOmAdí` hr
ZaH\$nmZdH\$na{YH\$nar h; &

_mZg Zo^NB©^NB©{nVm, nñ, n{V Anp nEZr,
anOm-àOm, goH\$ Anp ñdm_r g_nO OrdZ H\$ g^r
gâ~YññH\$mcFV_AnKeññVw H\$a {X`mh; &^JdnZ am_
Vnñd` \$`nRmñe\$fnñm_Wohr &

ñdVñ Vm AnñnbZ H\$ g_` _hnñ_m Jnñr H\$no
am_anÁ` BVZm ^m m {H\$ AnñnbZ H\$m CÖ` hr C{yh|Zo
am_anÁ` ñWñ{nV H\$aZm~Vm m&am_Zm H\$naAm `C{yh|Zo
OrdZ _|AñVg_` VH\$Zht Nñm&

Bg àH\$na g\$ {eam_{U VlogrXng ZoAZb\$JüVñ
H\$gnW am_M[aV _mZg ZmH\$JüVw H\$a aMZmH\$a^naVr`
OZ OrdZ H\$noZag epr goàaUmAnñH\$ññWNB©ññV_àJO>
H\$a {X`mh; &Bg_|AdJñhZ H\$a JñVobJñH\$a hñ g_m
{H\$VZohr _{U _nñr ànñ H\$a Yÿ`-Yÿ` hmo gH\$Vm h; &
gH\$b nXmaW h;OJ _nht, H\$_ñrZ Za nmdV Zñht &

bmbM&~br,

H\$nfñÜ` j , d[aö>Znñ[aH\$ gñWmZ, anOnWmZ,

erñnam, {Obm^rbdñm&

\\$mZ Z\$: 01484-222647

ANDHRA PRADESH SENIOR CITIZENS' CONFEDERATION PROGRAMME

March to September 2009

Realizing the importance of Science and Technology in the Life of senior Citizens, APSCCON has constituted a Panel under the chairmanship of Prof [Dr.] Kalluri Subba Rao, with eminent scientists in our State, as its members. The objectives of the Panel are going to be two fold, firstly creating awareness of scientific facts of interest to Senior Citizens, and secondly to initiate, guide and support research in areas which have direct impact on their welfare.

Largely due to the initiative of Dr.Kalluri Subba Rao, Chairman of the Science Panel the JNT University has launched a programme under the name " Innovative Research Programme" and had arranged a full day seminar on February 12 which was inaugurated by Dr. D.N.Reddy, Hon'ble Vice Chancellor. It was addressed by some eminent scientists, including Dr. B. Sesikeron, Director, NIN, on subjects relating to the process of ageing and and its implications.

As a result of the deliberations in the above seminar it was decided to organize a series of lectures which will be conducted on every second Sunday of the month in Sweekar Upkar Complex at 4.00PM starting March 8, 09. This programme will be conducted under the joint auspices of the Centre for Innovative Reseach, JNT University and APSCCON Zone 7.

The tentative programme for the next seven months is as follows

March 8, 2009 [Second Sunday] The Science of Ageing Process & Present Research to delay it by Dr. Kalluri Subba Rao

April 12, 2009 Human Anatomy & How Different Organs work by Dr. V.V.Subba Rao

June 14, 2009 Diet and Nutrition for Elders by a Scientist of National Institute of Nutrition

July 14, 2009 Fats and Oils for Good Health, by a Scientist from National Institute of Nutrition.

August 09,2009 Assistive Devices & Technological Aids to overcome Old Age Disabilities, Speaker to be announced

September13,2009 Arthritis – Disease of Old Age, Speaker to be announced

All Senior Citizens are cordially invited. Kindly note again the Venue and time.

Venue – Sweekar Upkar Complex, Opposite Jubilee Bus Stand,Secundrabad

Time - 4.00 PM

For more details kindly contact,

Mr. V,K, Narasimhan, President – APSCCON Zone 7, Tel 27894001/9603829857

Or. Dr. R. Vasunder Reddy, Vice President Tel: 9866470115

Or Dr. Pothamsetty, Secretary Tel: 9440532962

Or Mr. Rajendra Rao, Secretary E Mail -

Birthdays in April 2009

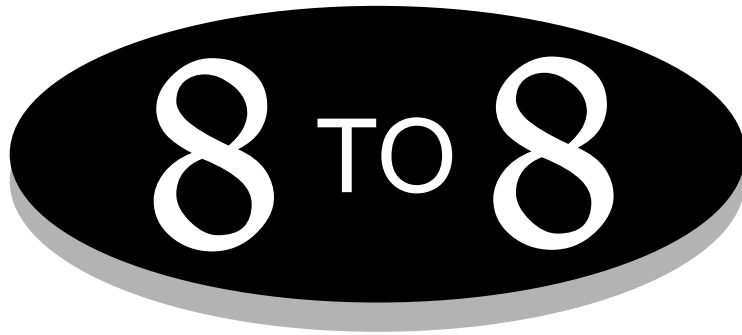
AISCCON NEWS wishes you a happy birth day and prays almighty for
your happy, healthy and contented life

Date	Name	Place	Date	Name	Place
1.	Shri K.K. Kale	Akola		Shri V.G. Agarkar	Ujjain
	Shri V. Venkateswara Rao	Bapatla	15.	Shri Jagdishchandra Dogra	Badlapur (E)
	Shri Parameswara Reddy	Guntur		Shri P.G. Venkiteswaran	Mulund (E)
	Shri C.M. Thulisidas	Chennai		Shri K. Muneswara Rao	Eluru
2.	Shri B.K. Kadam	Mulund (E)		Shri M. Santhanam Iyer	Nerul
3.	Shri S.V. Phalnikar	Mulund (E)		Shri K.R. Chedha	Mira Road (E)
	Shri S.B. Kumta	Pune		Smt. Sushma Bajaj	Nerul
	Shri S.N. Dube	Mira Road (E)	16.	Dr. Y.S. Purohit	Baroda
	Shri Luke R. Stahley	Nerul		Shri S.K. Joshi	Dombivili
4.	Shri Vasant G. Nagarkar	Mulund (E)		Shri Jayant B. Kapile	Nerul
5.	Shri B. Partha Sarathy	Bapatla	17.	Shri H.I. Desai	Daman
	Shri N.R. Bagre	Sangli		Shri Pandit Tulsiram Sharma	Ujjain
6.	Shri M.P. Sahasane	Karjat	18.	Shri Gopalrao Kulkarni	Ichalkaranji
7.	Shri A.S. Shivalkar	Mulund (E)		Shri B.Srinivasa Rao	Hyderabad
8.	Shri P.T. Deshmukh	Mulund (E)	19.	Shri D.T. Tiwari	Dhule
9.	Smt. N.D. Chandorkar	Pune		Shri Y.A. Dayagude	Pune
	Shri J. Paramesan	Nerul	20.	Shri P.N. Kher	Khargar
10.	Shri A.R. Viswanathan	Mulund (E)		Dr. B.I. Dalal	Mumbai
	Shri R.S. Birje	Mulund (E)	24.	Dr. N.G. Laghate	Nerul
	Shri Panchal Chimanlal	Mira Road (E)		Shri A. Jaganatharao	Hyderabad
	Shri K.P. Keshavan	Mulund (E)		Dr. M.V.S Ramarao	Tadepalligudem
11.	Shri P.N. Bhatia	Kanjurmarg (W)	26.	Shri U.G. Jundre	Talegaon
	Shri Kesari Patil	Mahim	28.	Shri Ramesh V. Dixit	Pune
	Shri Amrutlal C. Panchal	Kandivili (E)	30.	Shri Kedarnath Singh	Khargar
12.	Shri S.H. Mokashi	Mulund (E)	<u>Birthday Donation received from</u>		
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	Shri C.V. Nagabhushan Rao	Bangalore			
13.	Shri M.K. Raina	Pune			
14.	Shri V.J. Padhye	Nasik		Shri William R. Antony	- Mulund (E) - Rs.200/-
	Shri P.S. Easwaran	Pondichery		Shri Bharat Bhusan Sarda	
				- Koparkhairane	Rs. 100/-
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