



Using AI for Social Inclusion and Equitable Treatment of Sexagenarian Women

Alka Mathur¹ , Mansi Mathur^{2*} , Shravani Mathur³ 

¹Department of Liberal arts & Social sciences, School of Arts, Manipal University Jaipur, Jaipur, India

²Department of Business Administration, TAPMI School of Business, Manipal University Jaipur, Jaipur, India

³Department of Electronics and Communication Engineering, SAGE University Bhopal, Bhopal, India

mansi.mathur@jaipur.manipal.edu

Abstract. Artificial Intelligence is only a tool that can be beneficial or destructive, depending on its usage. We need to find ways to ensure that AI becomes a beneficial tool in our hands and not a weapon for destruction. AI for social good means that it should be used for improving the lives of humans and not for creating problems. AI has the capacity to act as a linking force between multiple Sustainable Development Goals (SDGs) because it can analyse complex systems, reveal hidden relationships, optimise trade-offs and exceed human limits of performance. This study focuses on AI applications in gender equality. Gender equality is SDG 5 of the United Nations, which includes the promotion of full and active participation of women in all levels of society. The paper explores how AI can be helpful to women above 60 years of age in leading a happy, normal and active life in India. India scores significantly low on the SDG 5 index, only 49 out of 100. The literacy rate for elderly females in India is only 28% as compared to 59% for men. In order to achieve the goal of an inclusive and equitable society, we need to empower women with the help of AI. We will be using a participatory approach for women's empowerment. This study focuses on well-educated sexagenarian women. We will see how AI can make considerable improvements in the day-to-day activities of old women living alone. AI cannot replace humans, but it can fill some gaps. The methodology used for this study is qualitative. Let us explore how AI can be helpful in achieving the goal of a society that includes women and provides equal opportunities to them.

Keywords: SDG 5, Artificial Intelligence, women empowerment, gender equality, UN Goals

1 Introduction

Artificial intelligence is changing the lives of everyone on this planet drastically. Our study is focused on older adult women living alone and experiencing social isolation. Thanks to artificial intelligence (AI), tech devices and home voice assistants can provide important updates and personalized support in every aspect of their daily lives.

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They share neighborhood weather reports, play their favorite music, remind them to take daily medications, and offer accurate directions when they are driving or walking. AI also powers the secure connection of their medical information to health providers, helping ensure they receive the best possible care.

AI-enabled devices can help reduce their negative effects by enabling them to connect with family and friends through video conferencing, participate in remote learning and exercise classes, and join virtual social clubs that bridge geographical distances.

Technology is playing an increasingly important role in supporting the elderly women in India by improving healthcare, safety, communication, independence, and overall quality of life. It also enhances safety and independence by automatically connecting to emergency services. As the senior citizen population continues to rise, tech-enabled solutions are becoming essential to meet their growing needs. The population of senior citizens in India (aged 60 and above) is projected to be more than double from roughly 100 million in 2011 to 230 million by 2036, according to the PIB and Shankar IAS Parliament reports. By 2036, this figure will represent nearly 15% of the total population, and by 2050, it is projected to rise to over 20% (approx. 319 million).

Our study focuses on the financial stability, education, prosperity and independence of the sexagenarian women. We are exploring the role of AI in ageing and gender bias.

2 Research questions

How can AI technologies be made suitable for inclusion of sexagenarian women in the society?

How can AI reduce age- and gender-based inequalities faced by Indian women in their sixties?

What hurdles do sexagenarian women face in using AI tools, and how can these hurdles be removed?

How do biases in AI systems affect the fair treatment of sexagenarian women in areas such as healthcare, and social welfare?

3 Review of literature

3.1 AI & Ageing

Ageing population is a critical challenge for Internet of Things (IoT) and artificial intelligence (AI). Health care of ageing population remains the primary focus of this paper. The study presents overview of IoT-based systems with a particular focus on the Internet of Healthcare Things (IoHT) and their integration with AI which is called as the Artificial Intelligence of Things (AIoT). IoT- and AI-integrated healthcare systems majorly focuses on helping ageing population through continuous health monitoring, personalized treatments, proactive medical interventions, improving disease management and promoting healthy, active ageing. However, the AIoT also faces certain challenges like privacy, security, ethics, interoperability, and user adoption^[1]. The ageing

population is supported by various applications of AI technology in healthcare systems by equalizing healthcare, reducing mortality rate and human error, reducing medical costs, as well as reducing reliance on social services. However, ageism in the era of digital devices and platforms, suggests that the use of AI might have discriminatory effects on older population or even cause harm. The issue of age biases and age discrimination in AI applications in medicine and healthcare systems is discussed and challenges are identified in this area^[2]. AI plays a crucial role in improving the health of older adults by enhancing cognitive support and improving social and emotional well-being. By providing better health opportunities, AI improves the quality of life for older adults. AI holds a significant role in enhancing psychological well-being for the ageing population. AI can support mental health interventions by addressing the unique needs of everyone^[3].

3.2 Gender Bias & AI

The factors contributing to Gender bias in AI are lack of diversity in both data and developers, programmer bias, and the existing gender bias in society^[4]. There are various approaches addressing the Gender bias in AI. The approaches should include implementation of diversity in society, data and fairness in AI development & reducing bias in algorithms.

The study proposes a framework for AI designers, developers, and other stakeholders to manage AI in such a manner so that gender bias in AI-based decision-making system can be reduced. The organizations should implement & frame strategies for ethical and fair AI outcomes. Also training programs and certification on ethical and fair AI should be planned for new employees^[5]. The study explores that gender bias in AI is caused by biased training data, as there are not enough women on development teams and algorithmic design choices. Through various programs people should be encouraged to use technology to reduce the gender gap in AI. Women participation should be encouraged through open design, rules on education that take gender into consideration and various programs that teach women digital skills to help them get started in the field^[7].

3.3 Participatory AI

Participatory approaches to artificial intelligence (AI) makes it more inclusive, equitable, robust, responsible and trustworthy. The paper reviews participatory approaches as situated in historical contexts as well as participatory methods and practices within the AI. Three case studies have been introduced in the paper. The case studies show there are desirable forms of participation that are already available that we can draw inspiration^[8]. By integrating the AI methods with participatory planning, the decision making can be improved. The SWOT framework has been used for analysis. The researcher tries to identify the threats & opportunities of using AI methods with participatory planning. The current state of AI enabled participatory planning & its future

scope is discussed^[9]. Participatory design provides good solutions through stakeholders' active involvement in design processes. However with recent advances in AI, it has reshaped how participatory design has been conducted. review contributes to our understanding of how AI can support stakeholders in participatory design. A systematic review of 14 empirical studies has been conducted. The literature suggests that AI can improve the accessibility and quality of participatory design by lowering the participatory threshold, and facilitating process execution, collaboration, and creation^[10].

4 Research Gap

While searching for research papers on the use of AI for improving the lives of sexagenarian women, we could not find much on this subject. We feel that in a country like India, where even today women are not treated equally due to our patriarchal society, older women are even more marginalised. Therefore, it is necessary to bring AI within their reach.

AI systems are generally trained on datasets that do not sufficiently represent older adults, particularly diverse demographic groups, leading to algorithmic bias and limited relevance for senior women. More inclusive, representative datasets focused specifically on women aged 60–69 (across races, geographies, socioeconomic statuses) are needed to ensure AI solutions are accurate and equitable.

Studies on AI literacy in older adults indicate wide variability in digital skills, understanding, trust, and confidence among people above the age of sixty. Existing research seldom investigates gender differences in AI adoption and training needs among older women.

Research should examine how sexagenarian women perceive, learn, and use AI, including barriers (fear of technology, trust, privacy concerns) and gendered social factors affecting adoption.

5 Research Methodology

This study is qualitative. A systematic literature review was conducted across major academic databases to identify recurring themes and patterns. Due to the lack of time, we could not collect primary data, but we strongly recommend collecting primary data using the participatory approach for further studies in this field. This is a conceptual paper. We have listed our findings in a systematic manner, and we have given the answers of the research questions in the discussion section.

6 Discussion

6.1 Use of AI technologies to promote social inclusion among sexagenarian women

AI technologies are increasingly shaping the inclusion of sexagenarian women in India by meeting their emotional, social, and practical needs. Platforms such as GenWise provide AI-driven companions and chatbots that help reduce loneliness, enable video calls, and support daily tasks, thereby enhancing emotional well-being. Voice-enabled assistants like Alexa and Google Assistant simplify digital interactions for seniors with limited technical literacy, allowing them to access information, set reminders, and control smart devices through voice commands. Regional language tools expand accessibility by supporting local Indian languages, ensuring that rural and non-English speaking women can engage with digital services more easily. Wearable devices and smart home monitoring systems powered by AI promote independent living by tracking vital signs, detecting falls, and monitoring movement patterns. Furthermore, digital literacy initiatives such as Internet Saathi and programs led by NGOs like HelpAge India leverage AI-based platforms to teach senior women essential skills, including smartphone use for online banking and social media, thereby strengthening their participation in the digital ecosystem.

AI technologies have a profound impact on the social and economic inclusion of sexagenarian women in India by fostering connection, independence, and active participation. AI companions provide continuous engagement and emotional support, helping elderly women living alone to overcome feelings of isolation. Digital financial tools guided by AI simplify complex banking and pension systems, enabling senior women to manage their finances independently and achieve greater financial autonomy. At the same time, AI-driven platforms encourage active aging by offering personalized content, interactive games, and hobby-based learning opportunities, keeping them intellectually stimulated and socially engaged. Together, these innovations not only reduce loneliness but also empower older women to remain financially self-reliant and mentally active, strengthening their role in both family and community life.

The adoption of AI technologies for sexagenarian women in India is not without challenges, and future directions must address these gaps to ensure meaningful inclusion. A key issue is the digital gender divide, as women over 60 often face greater barriers to technology adoption compared to men, requiring more time-intensive and tailored training programs. Equally pressing are data privacy and security concerns, since the risk of AI-related fraud and misuse is increasingly common, making it essential to build robust, safe, and trustworthy systems that seniors can rely on. Another critical area is the need for context-aware AI, which must evolve to be culturally sensitive and user-friendly for the Indian environment. This includes designing voice-based interfaces and low-literacy solutions that align with local languages, traditions, and usage patterns. Addressing these challenges will be vital for ensuring that AI not only empowers older women but also does so in a way that is equitable, secure, and culturally relevant.

6.2 Role played by AI play in reducing age- and gender-based inequities faced by women in their sixties

Artificial Intelligence (AI) is increasingly acting as a catalyst for reducing age- and gender-based inequities for women in their sixties in India by providing tailored healthcare, enhancing financial independence, improving social connectivity, and offering specialized security solutions. As India faces a significant demographic shift with a growing elderly population, AI tools help bridge the gaps created by traditional gender roles, mobility limitations, and lack of digital literacy.

6.2.1 Key roles played by AI

AI plays several critical roles in enhancing the lives of sexagenarian women in India, spanning healthcare, digital inclusion, financial empowerment, and safety. In healthcare and chronic disease management, wearable AI devices and smart sensors enable remote patient monitoring by tracking vital signs such as heart rate, blood pressure, and oxygen levels, while predictive analytics help detect early signs of conditions like Alzheimer's or heart disease. Telemedicine platforms such as e-Sanjeevani further expand access to specialists for women in rural or underserved areas, reducing mobility challenges. In terms of digital inclusion and cognitive support, voice-activated assistants like Alexa and Google Assistant simplify everyday tasks—booking appointments, setting medication reminders, or making video calls—while AI-powered games and apps provide cognitive stimulation to manage dementia and keep the mind active. For financial empowerment and independence, AI-driven fintech tools, including vernacular chatbots, help women navigate banking systems, understand investments, and access loans, while skill development platforms offer tailored training for re-skilling and entrepreneurship. Finally, in safety and social security, AI-enabled smart surveillance systems and wearable sensors detect falls or unusual behavior, sending alerts to caregivers, while AI-powered bots act as confidential advisors, guiding women in reporting harassment or accessing legal information under laws such as the Protection of Women from Domestic Violence Act.

6.2.2 Challenges in the Indian Context

Despite the many benefits of AI for sexagenarian women in India, several barriers continue to limit its widespread adoption. The digital divide remains a major challenge, as low digital literacy and limited access to technology in rural areas prevent many elderly women from engaging with AI-driven tools. Privacy concerns are also significant, with surveys showing that over 62% of elderly women worry about the security of their health data, highlighting the need for stronger safeguards against misuse and fraud. Additionally, design inclusivity poses a hurdle, since many AI devices are not tailored to the needs of older adults—interfaces often feature small fonts, complex navigation, or lack vernacular support. A 2025 study emphasizes the importance of developing more user-centric, culturally sensitive, and accessible AI solutions, particularly those

that incorporate voice-based and low-literacy interfaces. Addressing these barriers will be crucial for ensuring that AI technologies truly empower older women and foster equitable inclusion.

6.3 Hurdles faced by sexagenarian women in accessing AI-enabled digital platforms, and how they can be mitigated

Sexagenarian women (those in their 60s) face a complex, intersecting set of barriers when accessing AI-enabled digital platforms, ranging from technological design flaws to psychosocial hurdles. These barriers often lead to digital exclusion, limiting their independence and access to essential services.

6.3.1 Here is a breakdown of the barriers and potential mitigation strategies

Sexagenarian women in India face multiple barriers in accessing AI platforms that span technical, social, and economic dimensions. On the technical side, poor usability and design, coupled with accessibility failures that overlook age-related declines in vision, hearing, and motor skills, make interfaces difficult to navigate, while data bias in under representative datasets often leads to inaccurate recognition and analysis. Digital literacy gaps further compound the challenge, as many older women are “digital immigrants” unfamiliar with technology, lacking patient training and ongoing support, and struggling with constant updates that erode confidence. Psychosocial barriers also play a role, with technophobia, low self-efficacy, and internalized ageism discouraging engagement. Finally, trust and economic constraints limit adoption, as privacy concerns and fear of scams create distrust in data handling, while the high cost of devices, internet access, and subscription services makes AI tools financially inaccessible. Together, these barriers highlight the need for inclusive design, tailored training, cultural sensitivity, and affordability to ensure equitable access for older women.

6.3.2 How Barriers Can Be Mitigated

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By addressing these areas, AI-enabled platforms can shift from being a source of anxiety to tools that enhance independence and social connection for women in their 60s.

6.4 How do biases in AI systems affect the equitable treatment of sexagenarian women in areas such as healthcare, employment, and social welfare?

Biases in AI systems disproportionately and negatively affect sexagenarian women (those in their 60s) by magnifying existing societal ageism, sexism, and intersectional inequalities. Because AI models are trained on historical data that often reflects stereotypes, they replicate—and automate at scale—the exclusion and undervaluation of older women.

Biases in AI systems significantly affect sexagenarian women across healthcare, employment, and social welfare, reinforcing structural inequities. In healthcare, diagnostic disparities arise because many AI models are trained on male-centric data, leading to misdiagnoses when conditions present differently in women—for example, cardiac symptoms like fatigue or nausea are often overlooked. Large Language Models used in clinical decision-making may also recommend reduced care for women, while age-related bias in medical devices results in underperformance for those over 60 due to poor dataset representation. In employment, AI-driven recruitment tools perpetuate “gendered ageism” by penalizing resumes with caregiving gaps, older graduation dates, or limited digital footprints, while stereotype amplification in generative AI outputs favors older men for leadership roles over equally qualified women. Automated systems further exclude older women by using proxies for youth, such as technological fluency or social media presence. In social welfare and services, algorithmic exclusion emerges when automated systems demand high digital literacy, disadvantaging older adults, or when training data stereotypes them as dependent and frail, leading to misallocation of resources. Compounding these issues are underlying drivers such as intersectional disadvantage, the lack of diversity in AI development teams, and reliance on historical data that embeds decades of structural inequities. Together, these biases create a cycle of exclusion that undermines the promise of AI for older women unless addressed through inclusive design, diverse datasets, and policy safeguards.

7 Findings

7.1 Population, Financial and Educational Status of Elderly Women in India

For the use of AI in ensuring the inclusion and equitable treatment of sexagenarian women, they need to be financially independent and well educated. Due to this reason, we found out what their population, financial status and level of education are.

In 2025, women above 60 years of age are estimated to constitute approximately 6% of India's total population. This figure is derived from the fact that the total

elderly population (aged 60 and above) is projected to be around 12% of the total population in 2025, and women account for approximately 58% of that elderly demographic.

Percentage of population of women above 60 years who are graduate in India in 2025: Recent data from the Longitudinal Ageing Study of India (LASI) 2020 indicates that only about 1% of women aged 60-75 have completed 12 or more years of education (equivalent to intermediate/pre-university level or above), which suggests the percentage with a full graduate degree would be even lower. The low educational attainment among this older generation of women is attributed to historical gender disparities in access to education, though the trend for younger generations is more positive, with female graduate rates increasing.

Percentage of women above 60 years of age who are financially independent: In India, only a small percentage (typically less than 20%) of women above 60 years of age are financially independent in 2025, according to various reports and data from sources like the Longitudinal Ageing Study in India (LASI) and the Ministry of Statistics and Program Implementation (MoSPI).

7.1.1 High Dependency: Around 60% of older women have no personal income, and over 70% of economically dependent elderly women rely on their children for financial support.

7.1.2 Economic Activity: The percentage of elderly women participating in economic activities is low. In the 60-64 age group, approximately 18% of women in India were economically active (21% in rural areas and 10% in urban areas), and this rate decreases significantly for women aged 65 and above.

7.1.3 Lack of Personal Income: Less than 20% of elderly women are economically independent, a stark contrast to elderly men, where the majority are financially independent.

7.1.4 Vulnerability: Women account for 58% of the elderly population, and 54% of these are widows, which often worsens their financial vulnerability due to limited access to assets and property.

7.2 Government Initiatives

In the union budget for 2026, Government is allocating more than 1 lac crore rupees to the health sector. Govt is planning to train 1.5 lac caregivers for geriatric care. Form 15H/15G will have to be deposited only once by senior citizens. Customs clearance will be made easy for senior citizens on the airports. While schemes like the Atal Pension Yojana (APY) and Pradhan Mantri Jan Dhan Yojana (PMJDY) have increased women's participation in formal financial systems, significant gaps remain in actual financial independence and decision-making power, especially for older generations.

The *Senior Citizens Welfare Portal* serves as a centralised digital platform providing seamless access to government schemes, pension programmes, helplines, and downloadable forms for accessing services. It acts as a single-window system for senior citizens, voluntary organisations, and caregivers. However, its effectiveness depends on digital literacy and outreach efforts to ensure that older persons can access it.

Under the National Programme for Health Care of the Elderly (NPHCE), telemedicine services provide access to doctors without the need for travel—especially beneficial for homebound seniors and those living in rural areas. The government’s *e-Sanjeevani* telemedicine platform offers free, home-based medical consultations, helps manage chronic conditions such as diabetes and hypertension, and provides mental health counselling to address loneliness and stress.

Wearable devices like smartwatches and fitness bands monitor vital signs, track physical activity, and send emergency alerts, ensuring timely medical attention. Online pharmacies simplify access to medicines, allowing older adults to receive essential drugs at home and maintain continuity of care. Tata 1mg is one such company that provides medicines at your home. Additionally, smart home technologies such as cameras and sensors enable family members and caregivers to remotely monitor the well-being of seniors, offering peace of mind while respecting privacy. Together, these innovations are fostering a safer, more connected, and dignified ageing experience in India. Figure 1 presents the percentage of Indian sexagenarian women facing different financial conditions.

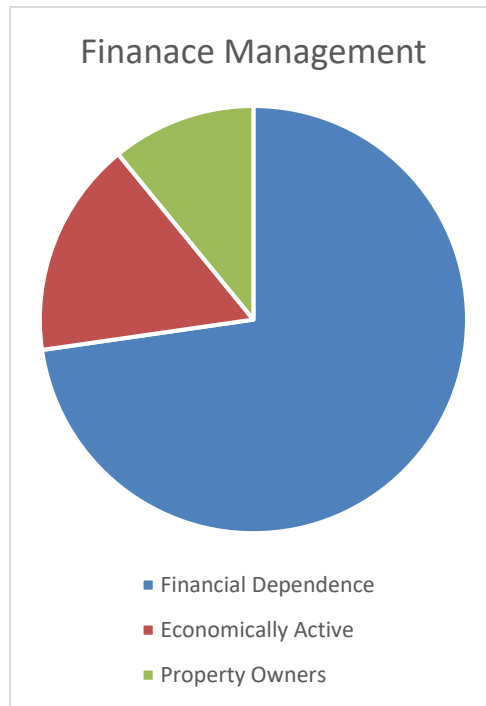


Fig. 1. Percentage of Indian sexagenarian women facing different financial conditions

7.3 Percentage of Indian women above 60 years of age who are the head of the family or having property in their names

7.3.1 Head of the Family

A 2011 study based on interviews with 10,000 older women found that **20.43%** reported being the head of their respective families.

Data from the Longitudinal Ageing Study in India (LASI) (2017-18) found that about **22.4%** of older females (60+ years) practised functional headship (active decision-making power), while a higher percentage (85.8%) of older males held this role.

7.3.2 Property in Their Names

Data from the National Family Health Survey-5 (NFHS-5) (2019-21) indicates that among women aged 15-49, 13% owned a house alone, and another 29% owned a house jointly with someone else (total 42.3% owning a house either alone or jointly). This survey is limited to a younger age group, so the percentage for women above 60 is likely different.

For land ownership among women (15-49 years), only 8.3% owned land alone, while another 23.4% owned it jointly.

A real estate report from the Mumbai Metropolitan Region (MMR) noted an increasing trend, with 18% of women property buyers in 2023 being more than 60 years old. This, however, only reflects active buyers in a specific region and year, not the total percentage of elderly women who own property.

Another study, also using the LASI (2017-18) data, found that only 1.5% of older females had assets solely in their name.

8 New AI applications/ Assistants for elderly women

Today, we are advancing forward with the usage of AI-powered home voice assistants that help elderly women to get real-time data on fluctuating weather temperatures, provide different directions for reaching the desired place, from the shortest distance to heavy traffic roads, the avoid chaos. It can help listening to the favourite music as it provides a lot of options like bhajans, contemporary Indian and Pop music, etc.

For instance, software developers for Medical Apps, travel Apps and Voice assistants like Alexa and Siri.

Leveraging AI for daily chores of adults, like the usage of AI AI-powered washing machine, can detect the level of soil, laundry's weight by using a combination of four sensors to optimise the water level, rinsing period and amount of detergent. Washing machine understands your laundry habits using deep learning methodologies and acts accordingly.

Doctors and patients are just one click away, as wearable and remote monitoring technologies provide you with the small, paste able devices which can stick to your

body easily to detect the vital signs, activity level for chronic disease management and elderly care in a more personalised and accessible way.

Primary voice assistants for smart homes are Amazon's Alexa, Google Assistant and Apple Siri. Alexa provides broad compatibility with its users; even elderly women can easily operate it as it is deeply customised.

Google Assistant is integrated with Google services and is used by most of the population in Asia and Europe. Apple Siri is well known for its strong privacy features, as these days elderly people are more targeted by cyber attackers like digital arrest, so if a sexagenarian woman is living alone in her apartment in metro cities, they are more vulnerable to such threats. Their children living in other cities and foreign countries teach them how to use these technologies seamlessly.

Life takes a new turn when one enters in her sixties. Living and enjoying life after official retirement age paves the path for the pursuit of your hobbies. There are so many AI assistance apps for solo travellers, like Host-a-sister, which provides a hostess who offers a welcome and a safe place to stay. One more app is there, Travel Ladies, which provides accommodation and food with medical facilities at the doorstep.

Medical applications that make elderly lives easier are Medisafe and Medicoach, which cover medical management like organising, scheduling, and tracking medication.

Doctor on demand and Teladoc are meant for consulting with doctors online and on the phone. 5 Star medical - US-based responsible people who would assist in an emergency, one application for the blinds who would relate to sighted volunteers through a live video conferencing is Be My Eyes. Life 360 allows family members to track the location of their parents, monitor their daily routine

Some apps provide the warning signal of falling through step counts and the distance between the two steps. Pocket Gait and G&B (Gait and Balance) are basically IoT-based falling detection systems. Accelerometers and gyroscopes are installed in a sensor like MPU6050, which can sense the speed and the orientation of a person who is wearing it, or it can be attached to a wheelchair, which allows senior people to perform their daily chores. This is achieved through an algorithm meant for identifying pattern that implies a fall through a sudden change in movement, which is compared with a pre-set threshold value.

9 Suggestions and recommendations

9.1 Digital Literacy and ICT Adoption among Older Women in India

The lack of digital literacy remains one of the primary barriers to the adoption of Information and Communication Technology (ICT) among sexagenarian women in India. While digital technologies have become central to healthcare, communication, and financial inclusion, many elderly individuals — particularly women and those in rural

areas — are unable to access these benefits due to limited technological skills and exposure.

A significant digital divide persists between urban and rural India, where disparities in connectivity, affordability, and education further limit digital participation among older people. Urban elderly citizens are more likely to use smartphones or access online services, whereas their rural counterparts often remain excluded from the digital ecosystem.

The importance of lifelong learning as a national educational goal was first formally recognised in India in the Kothari Commission Report (1964–65), which stated that “*in a modernising and rapidly changing society, education should be regarded, not as a terminal but as a life-long process.*” This vision laid the foundation for the idea that education must evolve continuously throughout an individual’s life.

Building upon this, the National Education Policy (NEP) 2020 reinforces the importance of adult education and promotes a mindset of continuous skill and knowledge acquisition. The NEP advocates for an Adult Education Curriculum Framework focusing on key areas such as digital literacy, financial literacy, commercial and entrepreneurial skills, health care awareness and ICT-enabled Adult Education Centres.

Through these initiatives, the NEP aims to empower adults — including older citizens — to become active participants in the digital and knowledge-driven society. However, the success of these efforts will depend on effective implementation, community-based learning models, and accessible technology infrastructure, especially in rural and semi-urban regions.

To ensure equitable and inclusive ageing in India, a multi-dimensional approach is needed:

9.1.1 Promote Digital Literacy for Seniors. ∴ Establish community-based, ICT-enabled learning centres focused on older adults—particularly women—to build confidence and digital skills.

9.1.2. Enhance Financial Independence: Strengthen pension coverage, micro-credit, and livelihood opportunities tailored for elderly women to reduce economic dependency.

9.1.3 Improve Access and Affordability: Expand rural digital infrastructure, affordable internet connectivity, and senior-friendly devices to bridge the rural-urban divide.

9.1.4 Integrate Lifelong Learning: Implement NEP 2020’s vision of lifelong education by creating flexible, age-inclusive programmes that combine digital, financial, and health literacy.

9.1.5 Encourage Intergenerational Learning: Promote initiatives where younger people assist older adults in learning and using digital tools, fostering community bonds and social inclusion.

9.1.6 Policy Integration: Mainstream elderly women's digital and economic empowerment into national and state-level ageing and gender policies.

10 Conclusion

We have included some key aspects related to the social inclusion and equitable treatment of sexagenarian women in this study. We have studied what their population, financial and education status is to gain insights into our problem statement. We have suggested the names of AI tools that can be used for their betterment and ways to improve their overall lives. We have given some recommendations for the betterment of sexagenarian Indian women. This is our contribution to the use of AI for social good. AI can contribute significantly to achieving gender equality, which is SDG 5 of the United Nations. There is ample scope for future studies in this field. This study can be extended to include other important communities in society.

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The authors have no competing interests to declare that are relevant to the content of this article.

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