



## **Expert Group Meeting on Older Persons in Emergency Crises**

United Nations Headquarters, Room S-1520  
15-17 May 2019, New York

### **Introduction**

The United Nations Expert Group Meeting on Older Persons in Emergency Crises was held from 15 to 17 May 2019 at UN Headquarters in New York. The meeting brought together 26 experts from across regions representing civil society, intergovernmental organizations and academia.

The occurrence and duration of emergencies have increased in the past years. Between 2005 and 2017 the number of crises receiving an international response grew from 16 to 30, and their average duration rose from 4 to 7 years. Exclusion faced by persons due to individual and social characteristics, such as age, sex, marital status, socio-economic factors, and health status, can determine their capacity to respond to crises, as well as their access to mitigation, adaptation and relief resources. Older persons are particularly at risk in disasters. Health conditions, such as impaired physical mobility, diminished sensory awareness or chronic illness, as well as social and economic disadvantages, can hinder the ability of many older persons to prepare and adapt to disasters. Older women can be more at risk than their male counterparts because on average they outlive men and are more often widowed and alone. Those that are less educated, unskilled, and poor are more likely to be victims of physical, financial, familial and sexual abuse which can be exacerbated in emergency situations.

However, evidence shows that older persons are often overlooked in emergency relief systems, which aggravates their vulnerabilities and worsens their capacity to respond and adapt to disasters or conflicts. Indeed, consideration of the differential needs and challenges faced by older persons is often lacking in all phases of emergency relief and management, from preparedness to response and recovery or post-disaster reconstruction. This may result in older persons being overlooked in the planning and design of emergency actions, or in the lack of the necessary skills among aid workers to understand, identify and address the specific needs of older persons, including nutrition, medical and psychosocial care.

In a context of rapid population ageing, a predicted increase in the number of disasters will result in large numbers of older persons impacted by crises. This reality attests to the urgency of ensuring that policies and programmes are sensitive to the specific risks, challenges and strengths of older persons and encourage and support their contributions in all phases of risk assessment, disaster preparedness, crisis management and recovery programmes in order to fully respect their human rights and guarantee that no one is left behind.

During the four sessions held in the first two days of the meeting, experts shared and discussed their work in different areas relevant to older persons in emergencies. They explored and proposed

a set of recommendations on the issue of older persons in emergency crises both as a group that faces specific risks and as a group to be tapped for their experience in national and international emergency relief systems.

Based on the discussions throughout the first four sessions, the final session was devoted to jointly formulate a set of recommendations and entry points on this topic, which will serve to position UNDESA to better support Member States in the context of two important policy processes: (a) the implementation of the 2030 Agenda for Sustainable Development; and (b) the General Assembly's Open-ended Working Group for the purpose of strengthening the protection of the human rights of older persons.

### **Session I: Older Persons in Emergency Crises: Setting the stage**

**Ms. April Pham, Senior Gender Advisor at the United Nations Office for the Coordination of Humanitarian Affairs (OCHA)** delivered a presentation on [Humanitarian architecture: responding to the needs of older men and women in emergencies](#). Against the backdrop of a growing population, the number of older people in need of humanitarian assistance has risen over the past years. Recent natural disasters and crises have shown the disproportionate impact of these events on older persons – with older women accounting for most of the deaths and injuries. Ms. Pham highlighted some of the key challenges faced by older persons in emergency crises including lack of mobility, increased family and care responsibilities, malnourishment, disabilities, lack of healthcare services and shelter, exploitation, and protection risks such as gender-based violence, and isolation. Even though older persons are more at risk than other population groups in an emergency, the response of the humanitarian system to their needs and challenges has been quite slow.

The agenda for humanity calls upon all humanitarian actors to act on five core responsibilities, which include the principle of “leaving no-one behind.” The Inter-Agency Standing Committee (IASC) - the longest-standing and highest-level humanitarian coordination forum of the United Nations system - has issued several relevant policy documents, including on protection and on gender. However, age and the needs of older persons still need to be better addressed and taken into consideration. More recently, the IASC “Gender with Age Marker” was launched as a tool to assess the extent to which programmes address gender- and age-related differences in humanitarian response and increase gender and age responsive programming. However, the tool is not as of yet part and parcel of everyday humanitarian business.

Ms. Pham concluded by highlighting the need to utilize the recently rolled-out Gender with Age Marker, as well as other available tools that disaggregate and analyze sex and age in humanitarian contexts. She also called for recognizing and tapping into the capacities of older persons and engaging with them to seek their insight on how communities mobilize and bounce back following emergency crises.

**Mr. Richard Blewitt, Head of Delegation and Permanent Observer for the International Federation of the Red Crescent Societies (IFRC) to the United Nations** delivered a presentation entitled [Older Persons in Emergencies](#). Mr. Blewitt began his presentation by recognizing the good work that has been done to address the situation of older persons in

emergency crises, yet noted that results in this area have been insufficient and that momentum and change has been limited. He pointed out that the humanitarian imperative is frequently denied in implementation and as a result the income, access to health services, protection and dignity of older persons is challenged. This situation is exacerbated by the insufficient provision of capacity building for relevant actors. Mr. Blewitt proposed several solutions and opportunities to tackle deficits in the implementation of humanitarian programmes:

- Improve and strengthen national laws; better define rights and entitlements of older persons in emergencies and duty bearers.
- Empower and support civil society.
- Invest in age-inclusive sustainable development resilience adaptation and preparedness.
- Support the voice and advocacy of older persons.
- Reinforce existing tools and analysis.
- Identify the common core agendas and areas for inter-generational solidarity.

Mr. Blewitt concluded by discussing existing alliances and partnerships, highlighting the positive results of the 2018 Global Disability Summit sponsored by the United Kingdom, which brought together thousands of representatives from Governments, donors, private sector and civil society organizations to sign a pledge to mainstream disability. He emphasized the need to find and showcase success stories of what Governments are doing well to encourage other Member States to do better. Recent reports of heat-related events and the fact that older persons suffer disproportionately from them, points to the need to insert a climate lens to discussions on ageing issues. Involving cities and engaging mayors on preparedness and response is another key dimension to bring attention to ageing and emergencies, especially when considering past failed experiences, for example, where older persons were evacuated without their medication. As the digital reality cannot be ignored, consideration should be given to the digital opportunities and risks as they relate to older persons in the humanitarian sector. Finally, Mr. Blewitt noted that very poor provision of shelter due to lack of resources places additional pressure on the ability to ensure shelter adaptation for older persons in emergency crises.

**Ms. Ann Pawliczko, a Demographic Consultant** presented a paper on [Demographics of Ageing and the Implications for Humanitarian Crises](#) where she pointed out that by mid-century, one in five or 2.1 billion people will be 60 years or over, comprising 21.5 per cent of the total population. Population ageing is happening in all regions and in countries at various levels of development. Large numbers of older persons already live in conflict and disaster-prone areas.

Ms. Pawliczko explained that humanitarian crises affect population groups differently and can exacerbate marginalization and pre-existing inequalities. One of the more seriously affected groups in society are older persons, who are among the most vulnerable in times of crises and many rely on others for their lives. It has been estimated that approximately 26 million older people are affected by natural disasters each year. Vulnerability is exacerbated by age discrimination. Many governments are not ready to cope with the growing numbers of older persons, who are too often invisible and neglected, as policies, programmes and budgets primarily focus on the youth.

Ms. Pawliczko explained that disaster “hotspots” are geographic areas where the risk from one or more natural hazards, including earthquakes, floods, drought, cyclones and landslides, is relatively high and/or associated with conflict and violence. Identifying areas of relatively high disaster risk potential is important to better inform humanitarian actors, development planners and

policy and decision makers, particularly on prioritizing disaster risk reduction efforts and identifying areas where disaster risk management is most needed. She noted that older persons are largely overlooked in disaster preparedness programmes, rescue efforts and reconstruction projects. Many have difficulty accessing humanitarian aid and are not always included in support provided by economic and social recovery programmes.

Ms. Pawliczko emphasized the need for accurate age and sex disaggregated data of the population to adequately respond to the needs of older persons caught in humanitarian situations. Unfortunately, this information is extremely difficult to obtain since most available data refer to total affected populations. There is an urgent need for sensitizing policymakers and the general public to the necessity of including older persons in humanitarian planning. It is particularly important that humanitarian aid workers and volunteers be fully trained on including older persons in disaster preparedness, rescue efforts and recovery programmes so that their particular vulnerabilities, specific needs and potential contributions are addressed during all stages of an emergency. Ms. Pawliczko concluded that it is also important to make humanitarian aid workers aware that not all older persons are helpless recipients but that many have valuable knowledge and experience in times of crises.

**Ms. Verity McGivern, Humanitarian Advocacy Adviser at HelpAge International** delivered a presentation on [What older people say about their experiences in humanitarian situations](#). The presentation is based on findings from rapid needs assessments and interviews that collect information directly from older people in order to inform humanitarian action as well as the policy and advocacy work of HelpAge International. Ms. McGivern noted that this research offers insights into the exclusion experienced by older people in crises based on self-reporting. It is critical to recognize that older persons are not a homogenous group and face diverse situations when affected by a crisis, and that leads to differential risks. Some of the challenges experienced by older persons relate to factors such as gender, disability, dementia and living alone. Understanding this complex diversity is key, as it affects how older people may or are likely to interact with services in humanitarian settings. It also helps challenge many of the assumptions that are otherwise brought into humanitarian response – one of which is that older persons will be looked after by their families.

Ms. McGivern also noted that priorities highlighted by older persons vary in different assessments and they are often rooted in the type of emergency crisis as well as what the situation prior to the crisis was. She emphasized the value of consultation and participation, which provides a nuance understanding of the reality experienced by older people and gives the opportunity to sharpen some of the blunt instruments used in humanitarian contexts.

Across the board, older people report significant barriers to accessing humanitarian assistance, which can be broken down to physical, attitudinal and institutional barriers. Lack of access to health services and food are often reported by older people. Issues related to lack of income and safety concerns are also highlighted. Despite efforts made by aid agencies to address access issues, research based on interviews with older people with disabilities exposed the many challenges they confront in accessing services due to overcrowding, physical barriers and institutional norms that require older people to go physically in order to collect their ration.

In conclusion, Ms. McGivern noted that the humanitarian community is currently failing to live-up to the core principles of humanitarianism when it comes to older people. The solution

lies within programme quality and is relevant not only to age-focused organizations, but also to protection and gender specialists.

In the discussion that followed the presentations in session I, participants highlighted the following key points:

- There is a need to raise awareness and communicate more effectively with policy makers on the issue of older persons in emergency crises, taking into account how policymakers process evidence and the humanitarian environment in which different stakeholders operate.
- It is crucial to position older people as rights holders during a crisis. Most disasters are responded to by Governments. As duty-bearers, they are obligated to ensure that older men and women are neither excluded nor discriminated against as per international human rights and humanitarian laws.
- Appropriate tools for inclusion of older persons exist, but there is a lack of decision-makers who would direct resources towards using these tools. There is a need to advocate for promoting compliance with tools, standards and guidelines that promote inclusion of older persons in prevention, preparedness and response efforts.
- There is a need for improved coordination and enhanced coherence between humanitarian and development work, making the best use of comparative advantage of diverse actors.
- Investment in age-inclusive sustainable development, resilience, adaptation and preparedness includes pensions and disaster risk reduction, bearing in mind that protecting and supporting older people before disasters occur is much more important than what is done during an emergency crisis.
- In a context where civil society is in retreat globally, necessary measures should be taken to ensure that older persons' associations get a seat on the humanitarian country teams of the United Nations to affect the nature of what gets done at the country level.
- There is an opportunity to benefit from lessons learned by the disability community in how it managed to gain the interest of Governments to hold a Disability Summit and progress the agenda of persons with disabilities in emergencies.
- Older people are often thought of as one homogenous group. An intersectional approach that recognizes when different forms of discrimination interact including gender, disability and age is essential.
- Older persons can be tapped for their knowledge and experience in times of crises and therefore should not be perceived solely as recipients of aid.
- Opportunities and challenges presented by the Gender and Age Marker were addressed. On the one hand, the marker assesses the extent to which programmes address gender – and age- related differences in humanitarian response. However, on the other hand, others viewed it as a box-ticking exercise, based on a description that perpetrates ageism, without evidence that it has had a positive impact in ensuring the quality and inclusiveness of assistance at the level of funding going to older persons.
- It is important to achieve more equity in humanitarian funding to ensure fair allocation of humanitarian resources, so that older people's needs are met.

- Ageism in the humanitarian sector should be recognized and prohibited.
- Mobilizing support to utilize existing platforms is crucial including, inter alia, the Titchfield Group on ageing-related statistics and age-disaggregated data, the United Nations national security council resolutions, as well as utilizing the reinvigorated resident coordinator system to take ageing into consideration in their priority architecture.
- Heatwaves should be considered as part of the new humanitarian landscape.
- Older people with disabilities are disproportionately more likely to be left behind in responses to emergencies and less likely to benefit from humanitarian services.

## Session II: Older Persons in Emergency Crises: Setting the stage (continued)

**Ms. Bela Kapur, Senior Visiting Fellow at the LSE Centre for Women Peace and Security** delivered a presentation based on her paper [Older Women in Emergency Crises: Vulnerabilities, Capacities and Opportunities](#), where she discussed the specific challenges that older women face in humanitarian crises as well as their role in peacebuilding. In her presentation, Ms. Kapur brought up the intersectional attributes faced by women who are often overlooked in crises, including age, location, class, race and ethnicity, among others. In crises settings, the experiences of older women remain largely overlooked despite the fact that they face the double gender and age discrimination.

The vulnerabilities of older women are heightened during natural disasters and conflicts in several ways. For instance unless specifically targeted, older women risk being overlooked during distribution of humanitarian aid and a result presenting worse nutrition outcomes, especially in cultures where women are forbidden to interact with males other than family members. Specific health needs of older women, such as those related to the end of the reproductive age, may go untreated or unchecked when health system in emergencies do not include such services. In addition, due to restrictions on mobility, gendered expectations of their social role and limited literacy, older women may lack access to important information and be neglected by outreach efforts, relating to political processes as well as humanitarian assistance. Gender inequalities that exist throughout the lifetime are exacerbated during crises and increase the likelihood of older women experiencing or falling into poverty. Whilst older women tend to be more numerous in displaced populations, age and gender barriers are likely to exclude them from decision-making and resources. Further, older women may find themselves taking on new responsibilities, such as looking after orphans and other vulnerable children, whose parents may have been killed or gone further afield.

Ms. Kapur noted the lack of information, research and understanding to the many ways in which older women contribute to their communities during and after emergency crises. She highlighted some of these positive roles. Many older women, for example, provide inter-generational support during and after emergencies, such as in their role as caregivers, as head of households and sole caregivers of grandchildren, persons with disabilities etc. Older women often play a role in peacebuilding and conflict resolution, by using historical memory and other

knowledge and experience which buttresses their authority within the community. Older women are frequently seen as the carriers of oral histories of positive pre-conflict narratives of shared living, neighbor relations, and being members of “the other” side who married across the conflict divide. In disputes concerning land and property rights after conflict, older women may assist with resolution as they know history of such properties. Older women also play a role in countering extremist nationalist narratives and nationalist tendencies amongst younger generations.

While understanding and addressing the vulnerabilities of older women in emergencies is key, Ms. Kapur stressed the need to also focus on their contributions, and how to make better use of their strengths. She underlined the importance of ensuring that women, including older women, are able to participate meaningfully in policy and decision-making processes that impact them, as well as in the analysis, policy, strategy and programme design of protection and humanitarian assistance programs.

**Ms. Supriya Akerkar, Senior Lecturer in Disaster Risk Reduction at Oxford Brookes University** delivered the presentation [Mapping of existing normative frameworks and guidelines: Implications for policy and practice](#). Dr. Akerkar presented a mapping exercise of existing normative frameworks and guidelines relevant to older persons in emergencies. She explained the methodology followed, consisting on identification of normative principles, enablers and barriers in the area of older persons in emergencies and their suggested priority policy and practice interventions.

In her research, Ms. Akerkar identified the following frameworks:

- MIPAA, 2002
- CEDAW recommendations on older women, 2010
- Inter-American Convention on Human Rights of Older people
- Global Compact on Refugees, 2018
- Convention and protocol relating to the status of refugees, 1951
- Refugee Convention; OAU, 1969
- Directive 2013/33/EU for refugees, 26th June 2013
- Guiding principles on internal displacement, 2004
- UN convention on rights of people with disabilities, 2006

As for the key guidelines, Ms. Akerkar identified the following:

- ADCAP Humanitarian Inclusion Standards for Older People and People with Disabilities, 2018
- ADCAP Good practice guide for inclusion of older people and people with disabilities (Akerkar and Bhardwaj, 2018)
- UNHCR- Help Age Older people best practices, 2012
- Help Age-IFRC shelter guidelines, 2011
- Older people in Emergencies: considerations for action and policy development by David Hutton, WHO, 2008
- Sphere Standards, 2018

In her presentation, Ms. Akerkar pinpointed some of the key areas where detailed guidelines are available, those where more work is needed, and areas where there are hardly any guidelines and new knowledge is needed. Some gaps in the existing frameworks were also highlighted. These included the engagement between different barriers faced by older people, the mainstreaming of principles of inclusion in organizations, the promotion of rights and entitlement awareness among older people, strategies for advocacy and visibility, and learning and dissemination.

**Ms. Bethany Brown, Researcher on the Rights of Older People at Human Rights Watch** began her presentation “Older People’s Rights in Emergencies” by contextualizing the issue within the human rights framework. Human rights are enshrined in law, are enforceable and govern the relationship between individuals and their governments.

The fourth Geneva Convention on the protection of civilians explicitly includes older people for protection in safe zones. The Convention Relating to the Status of Refugees does not address older persons specifically, but an addendum adopted by UNHCR refers to older persons in particular.

Ms. Brown noted that the humanitarian imperative of aid based on need demands humanitarian aid to be delivered impartially, regardless of considerations such as ability to access beneficiaries or number of beneficiaries. Yet, in many settings, older persons are not receiving aid because of planning that does not incorporate access for older people, which actively marginalizes them further. For donors, number of beneficiaries is often a basic benchmark, and this results in older persons not accessing life-saving humanitarian aid. This shows the importance of changing the way donors make decisions.

She highlighted the problem of ageism in humanitarian practice. For instance, when discussing older persons in humanitarian settings only in terms of vulnerabilities, the problem is been situated with older people rather than on the humanitarian system that is not serving all people in need of assistance.

Ms. Brown shared some opportunities for advocacy:

- Older people explicitly recognized in country specific Security Council resolutions, including its observations and mandates.
- The work that experts document on older persons in emergencies -including those in this Expert Group meeting- should be used as concrete evidence for the need for a Convention on Older Persons.
- A request could be made to the General Assembly from the Fifth Committee about how much the UN is spending on older persons in emergencies. This would show that out of the budget dedicated to humanitarian assistance, an insufficient amount is spent on older persons considering the number of older persons affected by humanitarian crises. This evidence would also allow a more nuanced conversation about the needs of older persons in crises.

**Ms. Silvia Perel-Levin, Chair of the NGO Committee on Ageing** in Geneva delivered a presentation entitled [Abuse, Neglect and Violence against Older Persons](#). Ms. Perel-Levin began

her presentation sharing the definitions of elder abuse and explaining the different types and characteristic of elder abuse. Preventing and responding to elder abuse, neglect and violence against older people not only entails identifying normative gaps but also addressing the enormous knowledge gaps that exist, especially in situations of humanitarian emergencies and crises. As an example she noted that while it is assumed and expected that there will be an increase of violence in these settings, further research is required to confirm and understand how violence against older persons operates in humanitarian situations.

Evidence on violence against women in emergency situations also suggests that older women may be at particular risk because they experience multiple and intersecting forms of discrimination. A study on prevalence and risk factors conducted among women and men over the age of 49 in situations of protracted displacement in Uganda, Kurdistan, Pakistan and Panama showed that an average of 77 per cent of respondents from all sites reported experiencing some form of violence associated with conflict or displacement, including gender-based violence, with 11 per cent stating they experienced sexual violence during displacement.

In her presentation, Ms. Perel-Levin addressed some of the myths and stereotypes that exist around elder abuse. These include the myth that abuse is only an issue of developed countries or that some countries are immune to elder abuse. In addition, the conception of older persons as frail and not contributing to society, contradicts the evidence and increases a perception of older persons as dependent and vulnerable. This can, in turn, increase discrimination.

Ms. Perel-Levin provided some suggestions to improve the policy response and enhance coordination in humanitarian settings. Firstly, data collection and research are key to develop evidence-based policy and interventions. Data collection should look at prevalence of elder abuse disaggregated by gender, age cohorts and disability; it should examine both victims and perpetrators; and it should follow a participatory approach in which older persons design the study and not only respond to its imperatives. Secondly, in order to ensure that prevention, detection and intervention are effective, Ms. Perel-Levin emphasized the importance of awareness raising and trainings of professionals, humanitarian teams and public information campaigns; the adoption of relevant legislation; access to remedy; life-long and human rights education; and advocated for an international binding human rights treaty on the rights of older persons.

In the discussion that followed the presentations in Session II, participants highlighted the following key points:

- Existing knowledge and best practices on older persons in emergencies are frequently not disseminated or are overlooked in policy practice. In order to address such deficiencies, improving communication, education and outreach is paramount.
- The approach to age friendly communities and cities with its emergency aspect was identified as relevant to older persons in emergencies, particularly considering that it has been adopted in a different array of countries. It was also noted that while tools of this approach are available, there are often important gaps in implementation. Organizations such as AARP have adopted the WHO Global Network of Age Friendly Cities, with positive results.

- The issue of property rights of women in emergency contexts and most generally property rights of older women and men can be at the heart of the challenges faced by older persons in emergencies and recovery efforts. Older persons are often overlooked in the humanitarian response because they are not registered administratively. In terms of property rights, the example of South Sudan was discussed, where concerns are being raised about the process of return since older women do not have the right to go back to the lands of their family and/or husband due to inheritance practices.
- A proposal was made to examine and focus on how the specific situation of older persons are dealt with or fit within the UNHCR Framework for Durable Solutions.
- The role played by older persons in their communities prior to an emergency does not automatically accompany them in displacement, with research confirming a significant shift in their roles. Analyses show that the power of older persons in their homes is often tied to their assets, which changes dramatically in displacement.
- A participant argued that while the IADC Gender with Age Marker is controversial in the context of older persons in emergencies, it should be considered a potential tool. It was suggested to focus on how the Marker can be coupled with guidance to make it more effective.
- In a context where the humanitarian community is under-financed, experts agreed on the need to redirect funding to local actors as a way to better address the situation faced by older persons in emergencies.
- Social protection, often overlooked in favor of health care, is key for older persons in emergencies and, as such, should be integral to humanitarian response.
- Devoting more efforts to disaster prevention and mainstreaming the needs and differential circumstances in such exercises, would build the resilience and capacity of older persons and communities to respond to emergencies.
- In many humanitarian settings, older persons are not considered as a specific group and accordingly they do not receive the same attention and focus than other groups, such as persons with disabilities. Subsequently, older persons are overlooked in humanitarian response, unless they experience chronic disease or a disability.
- Older persons need to be considered from the onset of a crisis and be factored in the design of all humanitarian projects.
- In contexts of repeated crises and hardship, international definitions on older persons are not valid, with persons at low as 40 being considered culturally and socially older persons. These considerations should be examined in the design of humanitarian action to ensure that older persons are not excluded from aid due to extraneous definitions.

### **Session III: Gaps, Challenges and Lessons learned**

**Ms. Isabelle de Muyser-Boucher, Humanitarian Affairs Officer at the United Nations Office for the Coordination of Humanitarian Affairs** delivered the presentation “Persons with

disabilities: an example worth following?” and shared the experience of moving the agenda on Persons with disabilities (PwD) in humanitarian contexts forward.

Ms. de Muysen-Boucher identified four important milestones in that work. First, the 2016 World Humanitarian Summit provided an opportunity to address the situation of PwD and, as an outcome of the Summit, the Charter on Inclusion of Persons with Disabilities in Humanitarian Action was adopted within 6 months. The Charter resulted from the cooperation between 17 organizations. The steering advisory Group for these efforts - composed by three member states, Handicap International representing civil society and UNHCR representing UN agencies- was able to coordinate inputs from more than 70 organizations. While the Charter is not a binding instrument, it sparked political momentum and is used as a tool by Governments to share knowledge and information on what each other is doing. Secondly, an IADC Task Team is currently developing the IADC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action, to assist humanitarian actors and Governments to change their practice across all sectors. These guidelines will provide a framework in the field on how to address issues of PwD. Thirdly, in the Global Disability Summit held in London in July 2018, humanitarian issues were identified as cross-cutting. It provided the setting for organizations such as OCHA to engage and make commitments to translate words into actions. Finally, the recently adopted Disability Inclusion Strategy is expected to have a positive impact in the inclusion of PwD in humanitarian programming. Ms. de Muysen-Boucher noted that advocacy efforts by partners since the World Humanitarian Summit proved to be key.

Based on the experience of PwD in humanitarian action, Ms. Muysen-Boucher provided some insights on how to make humanitarian action more age-inclusive:

- The process takes time – and it requires persistence. It is often difficult to translate words into actions both within and outside the United Nations, so it is important for key persons involved to keep putting pressure.
- Advocating for the appointment of dedicated focal points within the United Nations agencies is recommended.
- Political leadership in each entity at all levels is also important. This refers to leadership at the senior level but also at the policy/programming level. The structure used in Geneva in the case of Persons with Disabilities worked well.
- Side events play an important role. Ms. Muysen-Boucher mentioned for instance the ECOSOC Humanitarian Segment, which is held annually (in 2020 it will take place in New York).
- Other forums where these issues can be tackled include the UNHCR Global Refugee Forum, OSLO Conference on Ending Sexual and Gender-based Violence in Humanitarian Crises, and events of institutions such as ODI, HRW or OCHA, among others.

Finally, Ms. Muysen-Boucher shared some of the challenges encountered in the context of PwD. These include ensuring that political and advocacy work reach as many people as possible - which can be difficult in the case of older persons because they are not a homogenous group; coordinating institutions that work from different approaches; the lack of an agreed definition on who constitutes an older person; and the tendency of humanitarian action to work in silos.

**Ms. Kirstin Lange, Protection Officer for disability and ageing at the United Nations High Commissioner for Refugees** delivered the presentation [Older persons in forced displacement- intersecting risks](#). According to data, 3 per cent of refugees were over the age of 60 in 2017. In general, refugees are hosted in neighboring countries, with 85 per cent of refugees worldwide residing in developing regions, where national systems, including those for older persons are already under pressure. Some of the risks faced by older persons in forced displacement include being left behind when communities flee, becoming isolated from support systems, gaining new roles as caregivers and heads of households and compounding barriers to accessing livelihoods.

Ms. Lange highlighted some of the challenges in the access to documentation, social security, health care and communication experienced by refugees- with a focus on older refugees. For instance, health programming may overlook the health needs of older persons, such as non-communicable diseases care and prevention, access to assistive devices and mental health and psychosocial support. In terms of communication, it is observed that older persons are often left behind where technologies are being used in humanitarian action as a result of unfamiliarity with new technology, language barriers and unequal power relations within households. In some contexts, lack of access to documentation, movement restrictions, discriminatory policies and other hurdles may impact on access to national systems of social protection, including pensions.

Violence, exploitation and abuse of older persons can be exacerbated on forced displacement. This is due to several factors including less visibility to humanitarian actors delivering prevention and response programmes, barriers to reporting, and disruption of social networks. Incorrect perceptions regarding older persons can also pose a risk, for example when humanitarian actors assume that older persons are being taken care of by family members or that older women do not experience domestic violence.

Ms. Lange identified the recently adopted Global Compact on Refugees as an important entry point to advocate for the rights of older persons in large movements of refugees, including through the first ever Global Refugee Forum in 2019.

The presentation concluded with a set of recommendations:

- Enable non- discriminatory access to livelihoods opportunities.
- Reflect the needs of older persons in health programming.
- Include older persons in all aspects of prevention and better response to violence, exploitation and abuse.
- Conduct research on measures to ensure that older persons are not left behind due to the use of technology in humanitarian action.
- Strengthen the active roles of older persons in displaced and host communities.
- Ensure access to national systems, including pensions, for refugees and other displaced persons.
- Strengthen inclusion of age-related considerations in needs assessment, planning, monitoring and reporting for humanitarian action.

**Mr. William Ngabonziza, Executive Director of the Humanitarian and Development Consortium in South Sudan** delivered the presentation [Older Persons in Emergency Crises: beneficiaries identification and targeting criteria with older persons](#) in the context of South Sudan, where there are around 2 million internally displaced persons. In its work providing humanitarian aid, the Consortium has identified gaps in the identification process of older beneficiaries. Due to the numerous needs during crises, the identification of beneficiaries is limited to certain groups of concern, and often the needs and contributions of older persons receive little recognition. As a result, older persons are frequently excluded from programmes that would help them sustain or recover their livelihoods, such as cash for work, income-generation projects and micro-credit support, which are generally targeted at younger adults and designed without consideration to the roles and capacities of older persons.

Mr. Ngabonziza highlighted the vulnerability of older persons to poor nutrition in humanitarian crises. Markets or food distribution points can be difficult for them to reach and food aid packages do not cater for older people's particular nutritional requirements. Projects that are targeted to age groups tend to be designed for children below five years. However, the biggest challenge is that older men and women are rarely included in nutrition needs assessments and programmes.

The fact that only older persons at risk are considered in humanitarian protection represents a violation of the fundamental humanitarian principles of humanity and impartiality and results in a large number of older persons left behind. Where older persons act as primary caregivers, neglecting older persons has also a negative impact on their dependents.

In the experience of the Humanitarian and Development Consortium, wider approaches need to be taken in the targeting of older persons in emergencies, based on households or households with older persons. These are the basic criteria adopted:

- Households with 60-year old person or older. This could be flexible. In some countries people 55 years old are considered "old" and in the context of South Sudan each organization is defining older persons differently.
- Household with difficulty in meeting their basic needs.
- Unable to work - Loss of employment of older persons or bread-winners in the family.
- Limited or no access to food and water.
- Unable to access healthcare or to purchase necessary medicines.
- Damage or destruction of home or other assets.
- Loss of livestock and productive assets.
- Injury or death of primary wage earner.

**Ms. Fatimah Zuraidah Bt Salleh, Director of Federal Territory Kuala Lumpur of the Department of Social Welfare of Malaysia** presented [Social Support for Older Persons in Emergencies; Malaysia Perspective](#). Ms. Zuraidah Bt Salleh began her presentation providing an overview of the population in Malaysia and its ageing scenario. Estimates show that by 2030, 15 per cent of the population will consist of older persons. Malaysia experiences environmental threats in the form of periodic monsoon and urban floods, landslides, episodic pollution, haze, drought and earthquakes. The National Security Council Directive No.20 is the legal framework

on Disaster and Relief Management and establishes a holistic management mechanism for prior, during and post disaster stages, and determines roles and responsibilities of various governmental agencies involved in disaster management. The following challenges have been identified during disasters:

- Opening and closing of relief centers.
- Registration of the victims.
- Setting up food and essential items.
- Distribution of aid and medical assistance.
- Crisis intervention services and psychological support.
- Implementation of activities at the relief center.

In Malaysia, mechanisms are in place to support older persons during disasters. These includes medical support, providing equipment, making services barrier free and supporting mobility, delivering essential goods and hygiene kits, providing psychological support; offering specific diets, and providing spiritual perspectives.

Interventions to improve the country's response in emergency situations in the coming years, in particular regarding the situation of older persons, include:

- Developing Specific Standard Operating Procedure for older persons and PwDs in relief centers.
- The establishment of the National Disaster Management Agency to coordinate all efforts, especially during the recovery phase.
- Disseminating information on assistance provided by various agencies.
- Strengthening coordination with various agencies, especially those that provide assistance.
- Mobilizing community outreach programs in collaboration with government agencies and NGO's.

**Mr. Rawle Andrews Jr., Regional Vice President of AARP** delivered the presentation [Navigating the New Normal: Key Considerations for Older Adults, Family Caregivers and US-Based NGO Second Responders When a Natural Disaster Strikes](#). Mr. Andrews Jr. began his presentation sharing data that showed the rapid population ageing in the United States over the coming decades. He noted that natural disasters are becoming more frequent, intense and devastating. Combined, these realities point to the importance of adopting policies and programmes that consider the needs, roles and contributions of older persons in emergencies. Mr. Andrews Jr. highlighted the impact of extreme weather events. While improvements in early warning systems and response times to such events have been achieved, many commercial and residential buildings in the United States are ill-suited and poorly located for the severity of current extreme weather events.

Whereas the response times of first responders in the United States is improving and the learning curve is shrinking, there are still several challenges. Flooding is the number one natural disaster in the United States. Few Government emergency disaster plans fully consider the needs of a rapidly ageing population. There is no culture of preparedness, or a map of where older

residents actually live. Building patterns are inconsistent with the new climate hazard reality and known risks.

Another generally known, but often unspoken challenge of natural disasters, Mr. Andrews Jr explained, is the plight of family caregivers in the country. In the United States, there are 40 million caregivers providing over 37 billion hours of uncompensated caregiving support to adults with long term care needs. Of these, 55 per cent report being overwhelmed by the amount of care their love one requires and 60 per cent still work outside of the home. Support to caregivers on natural disaster planning is virtually inexistent. This can cause a “disaster within a disaster” where first responders routinely have to work around or rescue volunteers thus increasing the risks to lives and property. In addition, natural disasters provide fertile ground for fraud scams.

Mr. Andrews Jr. concluded his presentation by offering some recommendations to mitigate disaster management challenges:

- Establish a national or 50-state Disaster Management Registry to identify and track those most vulnerable, so that the mitigation, preparation and response efforts can more efficiently help those most in need as quickly as possible.
- Increase education about disasters, particularly floods, particularly in states like Florida, Texas and other jurisdictions bordering large bodies of water.
- Disaster Management Plans and Training must anticipate older adult needs.
- As shelters and other housing options are being established in the immediate aftermath of the natural disaster, the venues and floor plans must take into consideration the special needs of older adults.
- Legislation is needed to permit patients to safely obtain an adequate supply of necessary prescription medication during disasters.

In the discussion that followed the presentations of session III, participants highlighted the following key points:

- In order to strengthen the mandate on older persons in humanitarian organizations, in particular United Nations entities, the following ideas were put forward:
  - Establish dedicated focal points on older persons in each entity (that are distinct from the focal point on PwD) to provide technical guidance and ensure that the issue is addressed at all levels. Resources need to be available for focal points to perform their responsibilities, including funding for travel.
  - Establish policies and policy implementation plans on older persons in each entity.
  - Integrate the issue of older persons into the entities’ mandates.
  - Call for extrabudgetary funds to support the work on older persons within each entity -the UN Trust Fund for Ageing was given as a possible mechanism to this end.
  - Ensure that the issue of older persons is better addressed in reports.
  - Mobilize and engage all mechanisms that can support the work on older persons in emergencies within the United Nations such as the informal Inter-Agency Group on Ageing -a network of interested entities of the United Nations system- the Group

of Friends of Older Persons, the Independent Expert on the enjoyment of all human rights by older persons.

- Advocacy is needed at all levels.
- The experience on moving forward the agenda of persons with disabilities in humanitarian action highlights the importance of having a strong constituency working and pushing for the rights of older persons in emergencies.
- Showing the interlinkages between humanitarian crises and the Sustainable Development Goals and frameworks – especially the pledge to leave no one behind, is important.
- The engagement of mainstream humanitarian actors on issues related to older persons is key, rather than only engaging groups that specifically target older persons.
- Recommendations around return need to be devised, as well as recommendations and guidance to work with refugees in protracted situations, in particular to ensure their access to local social protection and health care systems.
- Public health departments need to engage in disaster preparedness and resilience activities, mindful of the needs, challenges and contributions of older persons in these situations.
- National disaster management registries that identify and track the most vulnerable older persons need to be established to ensure that mitigation, preparation and response efforts are more efficient, taking into consideration relevant privacy concerns.
- It is important that shelters and transitional housing utilized in the immediate aftermath of natural disasters take into consideration the special needs of older persons.

#### **Session IV: Gaps, Challenges and Lessons learned (continued)**

**Dr. Sari Mutia Timur, Director of Yakkum Emergency Unit** delivered a presentation titled [Left behind, access to rights and basic needs for older persons](#) in Indonesia. Dr. Timur shared the results of a rapid needs assessment that aimed to provide information on the conditions of older persons following the 2018 earthquake in Central Sulawesi, Indonesia. The assessment gathered and analysed information on health; independence in activities of daily living; vision; psychosocial needs; as well as nutrition, WASH and shelter needs of older persons. The assessment also provided recommendations on economic empowerment, strengthening of Posyandu Lansia - a model for care of older persons in Indonesia -, advocating for national health insurance, identity cards and age-friendly community health centres, as well as recommendations on distributing humanitarian aid.

The assessment highlighted several challenges including the lack of dedicated services to ensure access by older persons to health services, particularly by those with mobility limitations. The assessment also revealed that many older persons needed assistance in activities of daily living, and that while vision problems were common amongst older persons, there was little or no funding to address these conditions. Older persons also experienced lack of food and poor nutrition, as well as inadequate access to bathing facilities, particularly for those with mobility limitations. Temporary or permanent housing was often not accessible to older persons, with 45 per cent of older women and 36 per cent of older men unable to reach humanitarian service points; often

relying on family members and friends for support. Almost all older persons interviewed showed some symptoms of depression and were afraid earthquakes would hit their place again. Dr. Timur noted that one of the challenges in addressing mental health of older persons following the crisis was the stigma surrounding older persons where they were frequently regarded as a burden, especially in the context of a disaster.

Dr. Timur concluded that Indonesia is currently undertaking a revision of Law No. 13/1998 on older people welfare, particularly to emphasize that older persons are the responsibility of the family, community and State; to enhance a community-based approach; and to tap into the potential of older persons taking into account their skills and experiences. The revision also aims to promote a cross-programme, cross-sectoral and multi-stakeholder approach to help improve the quality of programmes for older persons and empower them.

**Mr. Christian Courtis, Gender and Women’s Rights Adviser at the Office of the High Commissioner for Human Rights (OHCHR)** delivered the presentation [Older Persons in Humanitarian Emergencies- The Human Rights Imperative](#) on behalf of **Khaled Hassine, Human Rights Officer at the Office of the Independent Expert on the Enjoyment of All Human Rights by Older Persons**. Mr. Courtis reflected on the 2019 Human Rights Council thematic report of the Independent Expert and provided recommendations on the protection of the human rights of older persons in situations of risk and humanitarian emergencies, including to:

- Ensure inclusive humanitarian action that responds to the specific needs and vulnerabilities of older persons and to build on their capacities;
- Identify good practices on how to foster inclusive humanitarian aid and highlight potentially positive experiences;
- Understand the causes and implications of inadequate or lack of humanitarian assistance and propose solutions;
- Support humanitarian principles which demands assistance to be delivered impartially, and to prioritize assistance to those most in need without discrimination. In practice, however, there is a “one-size fits-all” approach in humanitarian action which overlooks specific issues – such as biopsychosocial support for older persons.

The presentation highlighted that emergency situations have a disproportionate impact on older persons for various reasons. For instance, older persons have hearing or visual difficulties that can limit their access to crucial emergency information and limit awareness of the gravity of the situation. Older persons often have chronic health issues or needs which may delay or prevent escape and evacuation. Additionally, older persons may also be reluctant to reach out or seek shelter. Older persons are commonly perceived solely as recipients of help. In situations where relocation must be conducted, older persons may have a particularly strong attachment to a place—therefore permanent displacement and relocation may have effects on their mental health. Social isolation may also be a problem: many times, shelters group older persons together, separating them from intergenerational family support networks. Crisis situations also increase the risk of neglect, exploitation and violence.

Mr. Courtis concluded by highlighting measures to ensure effective relocation of older persons, including consulting older persons and actively involving them in rehabilitation planning; actively involving them in community efforts to identify new land and homes; and ensuring adequacy of shelters and new housing for older persons.

**Ms. Sofia Rivas Rufin, Advisor from the cabinet of the First Lady of Chile** delivered a presentation on [Minimum Standards for Age and Disability Inclusion in Humanitarian Action](#), adopted in Chile. As a country that often experiences natural disasters such as earthquakes, tsunamis, forest fires, volcanic eruptions, floods and droughts, the standards are essential to provide an effective humanitarian response. The number of older persons in Chile is 3.2 million and the average life expectancy is 79.8 years. Therefore, Chile identified the impact of natural disasters on older persons as a national priority.

The country recently adopted the Minimum Standards for Age and Disability inclusion in Humanitarian Action, which are guidelines aimed at humanitarian organizations and state agencies in charge of emergency and crisis response, with a special focus on municipal civil protection offices. The standards aim to incorporate the needs of older persons and people with disabilities in national plans, programmes and public policies related to crises, emergencies and humanitarian action. The adopted standards also aim to facilitate the inclusion of older persons and people with disabilities in the programmes of humanitarian organizations, to ensure that both groups receive the assistance that responds to their gender-specific needs and capacities, and to inform and guide the design, implementation, monitoring and evaluation of programmes and policies in these organizations. The guidelines also aim to strengthen accountability to older persons and people with disabilities while supporting advocacy, capacity-building and preparedness measures on age and disability across the humanitarian system.

Ms. Rivas Rufin noted that the framework contains 8 inclusion standards and 7 sector-specific standards. Both are supported by related actions and are designed to be relevant in all settings, including urban and rural communities, camp and non-camp settlements. The standards incorporate cross-cutting themes such as gender-sensitivity, protection and the role of care providers, among others.

In conclusion, Ms. Rivas Rufin highlighted the importance of the application of Minimum Standards for Age and Disability inclusion in Humanitarian Action to achieve the humanitarian principle of impartiality and humanitarian quality and accountability.

**Mr. Matthew Wells, Senior Crises Advisor from Amnesty International**, delivered a presentation on the [Impact of Conflict and Displacement on Older People in Myanmar](#). Mr. Wells shared some of the findings of a survey conducted in the context of displacement in Myanmar, showing that a disproportionate number of older persons was affected in the crisis. Amongst the main challenges identified for older persons were the dilemma to “stay or be left behind” due to mobility limitations, older persons being tasked with property protection because of the perception that they were less at risk, and strong ties to land and home or exhaustion from repeated displacement which prevented them from leaving. The survey also found that older persons

experienced trauma, often as a result of repeated displacement. Crimes against the adult children of older persons frequently placed them as primary caregivers for grandchildren.

In view of the outcomes of the survey, Mr. Wells shared measures aimed at a more effective and inclusive humanitarian response, including to:

- Carry out life cycle contextual analysis to understand risks:
  - o Recognize that assistance to centralized displacement sites is not good enough.
  - o Understand that failure to push back on humanitarian restrictions may disproportionately impact older persons;
- Consider particular concerns around land in relation to older persons;
- Include older persons in psychosocial care programmes and activities;
- Enhance data inclusion and disaggregation;
- Prepare and train on specific attention to risks associated with ageing.

Mr. Wells concluded by highlighting the need to steer away from misleading assumptions about older persons, including the assumption that they are being cared for by family members; that a centre-based response is good enough to address their needs; and that older persons do not face sexual and gender-based violence. He advocated for moving from an approach based on luck to an approach based on individual rights and identifying individual/group risks.

**Mr. Heorhii Tuka, Deputy Minister from the Ministry of Temporarily Occupied Territories and Internally Displaced Persons (IDPs) in Ukraine** gave a synopsis of the situation of armed conflict and temporary occupation in Ukraine with regard to the rights of older persons. Since the conflict in eastern Ukraine began in 2014, and despite high crime rates and a weak economy, the government has continually recognised the diverse needs of older persons, including those of the 1.5 million registered IDPs. Mr. Tuka noted that since the beginning of the conflict, the government officially registered older persons as IDPs in temporarily occupied territories to enable identification and tracking for social pension benefits by the state-owned bank. The registration of older persons as IDPs, however, has obscured the actual reality of IDP numbers in Ukraine.

Mr. Tuka explained that one way in which the country works toward meeting the needs of older persons is by providing adequate heating during the winter season, with government and non-governmental organisations working together to address this issue. Major gaps identified include the lack of coordination between government and non-governmental organisations to ensure a smooth service delivery, as well as burdensome bureaucratic structures. Giving an example from Donetsk, one of the regions with large numbers of IDPs, Mr. Tuka noted that a coordinated and multi-sectorial response from the government, strong local structures and international support is required to cater to the needs of older persons and to enable the effective implementation of relevant national strategies and legislation. Mr. Tuka also identified bottlenecks, including the lack of training for older persons so that they can be aware of their rights, and stressed the importance of providing the needed political and financial support to that end.

In the discussion that followed, participants highlighted the following key points:

- The need for strengthened policies and dedicated services to ensure an inclusive humanitarian response that targets the needs of older persons and assists them in an impartial and non-discriminatory manner.
- In addition to economic and financial needs, comprehensive physical and psychosocial support is required to help older persons cope in situations of emergencies.
- An effective humanitarian response involves identifying the specific needs of older persons, building on their capacities and contributions and avoiding a “one-size-fits-all” approach.
- Consultations with older persons during emergencies is crucial to harness their skills and knowledge and to promote good practices.
- National guidelines and standards of operation are essential tools to help countries contextualize their emergency and humanitarian responses.
- A complete humanitarian response should entail data disaggregation by age and comprehensive needs assessments, supplemented by effective programme design, in order to properly identify and respond to individual and group risks.
- Civil society organisations and governments can strengthen coordination efforts and adopt a multi-sectorial approach for smooth service delivery in emergency crises.

### Recommendations

1. Promote and further the rights of older persons in emergencies and urge institutions involved in humanitarian action to be inclusive of their needs, challenges and contributions.
  - Recognize that marginalization, exclusion and poverty experienced by many older persons is exacerbated during crises, and that physical, attitudinal, environmental and institutional barriers exist that result in the disregard of older persons’ needs, challenges and contributions during emergencies.
  - Further, acknowledge that older persons do not constitute a homogeneous group, with needs, challenges and contributions varying significantly among different older persons, and that some subgroups, such as older women or older persons with disabilities, present differential risks and are disproportionately more likely to be left behind in emergency responses.
  - Understand that transformative actions to further the rights of older persons will need to confront ageism, establish human rights as the overarching principle behind humanitarian action, and bring visibility to the multiple challenges faced by older persons in emergencies, as well as to their contributions.

- Support the delivery of impartial and accountable humanitarian assistance that responds to vulnerability in all its forms and is tailored to the rights of older persons;
- Ensure transparent adherence to existing obligations, standards and frameworks for the protection of older persons in emergencies and, where needed, strengthen or develop guidelines and frameworks relevant to emergencies to ensure that humanitarian responses are age-inclusive.
- Recognize that the political will of Governments and commitment at the leadership level of the United Nations and other relevant multilateral organizations, along with a dedicated budget, is critical in moving the agenda of older persons' inclusion in emergencies forward.
- Break down silos and foster a coordinated and coherent response by all entities involved in humanitarian action, including local actors, donors, multilateral organizations, civil society and the private sector.
- Incorporate older persons in institutional mandates and establish dedicated focal points in all United Nations agencies and other relevant multilateral institutions.
- Reiterate the call of the Secretary-General for international humanitarian and development providers to set aside artificial institutional labels as development or humanitarian, working together over multi-year horizons.

## 2. Promote an age-inclusive response to emergencies.

- Consult, engage and foster the participation of older persons, and their associations, in the design and implementation of policies, plans, standards and programmes in emergency settings.
- Strengthen the inclusion of age-related considerations in needs assessment, planning, monitoring and reporting of humanitarian action.
- Encourage Governments and humanitarian actors to review their targeting criteria to guarantee that humanitarian programmes include older persons and do not expose them, especially older women, to additional risks.
- Support the active roles of older refugees, including older women, in displaced and host communities.
- Build a culture of preparedness among all stakeholders, including older persons and their caregivers, and encourage awareness and education for disaster mitigation and preparedness and disaster risk reduction.
- Acknowledge and address the needs, challenges and contributions of older women in emergencies.

- Recognize the role played by older women as agents of change and leaders of processes for social cohesion and peace-building, especially in contexts of conflict and displacement.
- Address the gender-based violence experienced by older women in emergencies, by removing age caps in research and programmes on GBV in emergencies.
- Ensure that older persons in crises, older refugees and older IDPs, have access to health services, including treatment for non-communicable diseases, mental health services and isolation, taking into consideration the differential health needs of older women, and develop legislation and policy frameworks to guarantee that older persons can safely obtain adequate supply of necessary prescription drugs during emergencies.
- Ensure that older persons, in particular those in displacement, have access to social protection schemes in host countries, including to pensions.
- Support older persons in displacement to access registration services and obtain identity documents.
- Support older persons in displacement to reunite with family.
- Enhance the access of older persons to food and nutrition during emergencies by removing barriers and ensuring that nutrition assessments take into consideration the specific nutritional needs of older persons.
- Enable non-discriminatory access of older refugees and IDPs to livelihood opportunities, including access to work in host countries and livelihood programs by, among other actions, removing age caps in such programmes.
- Establish standards and guidelines on shelters and transitional housing in contexts of emergencies that take into consideration the specific needs of older persons.
- Support the access of older persons to justice, remedy and legal support in emergency settings.
- Support access to water, sanitation and hygiene in emergency settings for older persons, with particular attention to older persons with disabilities and older women.
- Apply and promote accessibility and “universal design” in all aspects and phases of humanitarian action.
- Examine and address the specific situation of older returnees within the UNHCR Framework for Durable Solutions in contexts of displacement.
- Examine the potential of new technologies in humanitarian actions to exclude and/or include older persons and ensure that they are not left behind.
- Establish a set of best practices or standard protocols on the mobilization of unaffiliated volunteers and to prevent fraud in emergencies.

- Recognize the role played by older persons as caregivers in emergencies and acknowledge that a humanitarian action that is blind to the situation of older persons also affects their families and the community at large.
3. Provide adequate finance to ensure that humanitarian action is age-inclusive.
- Provide appropriate funding to support the specific needs and rights of older persons for health, social protection, food and nutrition, shelter, WASH, and protection in emergency settings.
  - Call upon donors to establish requirements related to the inclusion of older persons in their funding of humanitarian programmes and adopt guidelines for inclusive grant making that go beyond beneficiary numbers.
  - Determine the actual expenditure on targeted support to older persons in humanitarian programmes as a way of bringing visibility to the current neglect of older persons in emergencies.
  - Provide appropriate funding and support to local humanitarian actors.
4. Undertake, support and promote the collection, compilation and dissemination of data, research capacity development and training on older persons in emergencies for an informed humanitarian response.
- Recognize the need to collect, compile and disseminate data disaggregated by age, sex and disability to provide robust evidence for the design and implementation of programs, and demonstrate the impact of crises on older persons.
  - Further, conduct age-specific research on issues relevant to older persons in emergencies to enhance the evidence base and inform humanitarian action.
  - Call upon relevant actors to collect age and gender disaggregated data in the access to entitlements under national systems during crises, both in the country of origin as well as host countries where displacement occurs.
  - Support research and data production where insufficient knowledge and data gaps exist, including in areas such as elder abuse or older refugees and IDPs in detention, among others.
  - Develop and maintain the knowledge and skills of humanitarian actors through continuous learning to enable them to identify the needs of people at risk in emergencies, including older people, and deliver appropriate and accessible assistance.
  - Train humanitarian actors and first responders in issues related to older persons in emergencies to ensure age inclusion.
  - Support national and local capacity through training.

- Invest in campaigns to ensure that communities, and older persons themselves, understand the rights and entitlements of older persons in emergencies.
- Remove age caps in relevant research on disasters, conflicts and humanitarian action.

### **Advocacy/ Entry points**

Taking into consideration the paucity of national and international systems to respond and address the needs, challenges and contributions of older persons, experts emphasized throughout the meeting the importance of boosting and improving advocacy efforts regarding the situation of older persons in emergencies. The following venues and frameworks were identified as entry points to the work on older persons in emergencies:

#### *Normative and policy frameworks*

- Madrid International Plan of Action on Ageing (MIPAA)
- CEDAW recommendations on older women (General recommendation No. 27)
- Inter- American Convention on Protecting the Human Rights of Older Persons
- Global Compact on Refugees
- Convention and protocol relating to status of refugees
- OAU Convention governing the Specific Aspects of Refugee Problems in Africa
- Protocol to the African Charter of Human and People’s Rights on the Rights of Older Persons in Africa
- Directive 2013/33/EU of the European Parliament and of the Council (Refugees)
- Convention on the Rights of Persons with Disabilities and Optional Protocol
- United Nations Sustainable Development Goals
- United Nations Disability Inclusion Strategy
- New Urban Agenda

#### *Fora*

- International Day of Older Persons
- Humanitarian Networks and Partnerships Week
- ECOSOC Humanitarian Affairs Segment
- Global Refugee Forum
- Global Fund on Dementia
- NGO forums
- Decade of Healthy Ageing (2020-2030)
- WHO Global Network on Age friendly cities and communities
- The ILO Centenary
- The World Summit on the Information Society Forum

- Beijing +25
- Oslo Conference on Ending Sexual and Gender-based Violence in Humanitarian Crises

### *Mechanisms*

- United Nations Trust Fund for Ageing
- UNHCR Framework for Durable Solutions
- Human Rights mechanisms
- Titchfield City Group on Ageing-related Statistics and Age-Disaggregated Data
- Regional consultations by UN Regional Commissions (Fourth Review and Appraisal of MIPAA)
- Country-specific Security Council resolutions

### *Organs and bodies*

- General Assembly Open-ended Working Group for the purpose of strengthening the protection of the human rights of older persons
- United Nations Security Council
- United Nations Human Rights Council
- Governing board of UN agencies
- United Nations System Chief Executives Board for Coordination (CEB)
- Working Party on Humanitarian Aid and Food Aid (COHAFA)
- UN Development Operations and Coordination Office (DOCO) – Resident Coordinator system
- Informal Inter-Agency Group on Ageing (IAGA)
- Groups of friends of older persons
- NGO working group on women, peace and security (based in NY)
- High Level Political Forum

## LIST OF PARTICIPANTS

### Experts

#### Session I: Older Persons in Emergency Crises: Setting the Stage

**Christian Courtis** (*moderator*)  
Gender and Women's Rights Adviser  
Office of the High Commissioner for Human Rights  
New York, USA

**Verity McGivern**  
Humanitarian Advocacy Adviser  
HelpAge International  
London, United Kingdom

**April Pham**  
Senior Gender Advisor  
OASG, Office for the Coordination of Humanitarian  
Affairs  
New York, USA

**Richard Blewitt**  
New Permanent Observer for the  
International Federation of the Red Crescent Societies  
to the United Nations  
New York, USA

**Ann Pawliczko**  
Demographic Consultant  
New York, USA

#### Session II: Older Persons in Emergency Crises: Setting the Stage (continued)

**Werner Obermeyer** (*moderator*)  
Deputy Executive Director  
World Health Organization Office at the UN  
New York, USA

**Bethany Brown**  
Researcher, Rights of Older People  
Human Rights Watch  
New York, USA

**Bela Kapur**  
Senior Visiting Fellow  
Centre for Women Peace and Security London School  
of Economics  
London, United Kingdom

**Supriya Akerkar**  
Senior Lecturer  
Center for Development and Emergency Practices  
Oxford Brookes University  
Oxford, United Kingdom

**Silvia Perel-Levin**  
Chair, NGO Committee on Ageing in Geneva  
Geneva, Switzerland

#### Session III: Gaps, Challenges and Lessons Learned

**Silvia Perel-Levin** (*moderator*)  
Chair, NGO Committee on Ageing in Geneva  
Geneva, Switzerland

**William Ngabonziza**  
Executive Director  
Humanitarian Development Consortium  
Juba, South Sudan

**Isabelle de Muysier-Boucher** (*remote*)  
Humanitarian Affairs Officer  
Office for the Coordination of Humanitarian Affairs  
Geneva, Switzerland

**Fatimah Zuraidah Bt Salleh**  
Director of Federal Territory Kuala Lumpur  
Department of Social Welfare  
Putrajaya, Malaysia

**Kirstin Lange** (*remote*)  
Protection Officer (disability and ageing)  
United Nations High Commissioner for Refugees  
Geneva, Switzerland

**Rawle Andrews Jr.**  
Regional Vice President  
AARP  
Washington DC, USA

## Session IV: Gaps, Challenges and Lessons Learned (continued)

**Verity McGivern** (*moderator*)  
Humanitarian Advocacy Adviser  
HelpAge International  
London, United Kingdom

**Sari Mutia Timur**  
Doctor of Medicine and Director  
Yakkum Emergency Unit  
Yogyakarta, Indonesia

**Sofia Rivas Rufin**  
Advisor  
Cabinet of the First Lady, Presidency of Chile  
Santiago, Chile

**Heorhii Tuka**  
Deputy Minister  
Ministry of Temporarily Occupied Territories and  
Internally Displaced Persons (IDPs)  
Kyiv, Ukraine

**Matthew Wells**  
Senior Crisis Adviser  
Amnesty International  
Washington DC, USA

## Other Participants

**Paula Iwanowska**  
Attaché (Humanitarian Affairs)  
European Union Delegation  
to the United Nations  
New York, USA

**Vânia de la Fuente-Núñez**  
Technical Officer  
Department of Ageing and Life Course  
World Health Organization  
Geneva, Switzerland

**Rocío Maradiegue**  
International Organization for Migration  
Office to the United Nations  
New York, USA

**Pytrik Dieuwke Oosterhof**  
Sustainable Development Consultant  
O-Land Consulting  
New York, USA

**Erica Dhar**  
Director Global Alliances  
International Affairs AARP  
New York, USA

**Scott Pohl**  
Senior Policy Officer  
United Nations High Commissioner for Refugees  
New York, USA

## United Nations Department of Economic and Social Affairs (DESA)

**Amal Abou Rafeh**  
Chief  
Programme on Ageing Unit  
Division for Inclusive Social Development

**Julia Ferre**  
Social Affairs Officer  
Programme on Ageing Unit  
Division for Inclusive Social Development

**Shatho Nfila**  
Associate Social Affairs Officer  
Programme on Ageing Unit  
Division for Inclusive Social Development

**Claudia Beatriz Altavas**  
Team Assistant  
Programme on Ageing Unit  
Division for Inclusive Social Development