

Minimum Standards for Age and Disability Inclusion in Humanitarian Action

Chile is a country that constantly faces natural disasters. Located on the “Pacific Ring of Fire”, it is one of the most seismically active countries in the world and its long territory is full of many active volcanoes. In addition, it is vulnerable to almost all types of natural and anthropogenic hazards. This, combined with the effects of climate change, makes our territory extremely prone to disasters and, therefore, in constant need of effective emergency response and humanitarian action.

Only in the last decade, Chile has had four earthquakes with a magnitude over $M_w^1=7.0$. On February 27, 2010, a powerful earthquake, with a magnitude of $M_w=8.8$ followed by a tsunami struck the center and south of the country, killing 521 people. Of that number, 353 people died as a consequence of the earthquake, with the other 168 perishing as a result of the tsunami. From the total number of deaths, 192 were aged 60 years and over (36.8%)². This age group is the most affected by emergencies and at the highest risk of dying in these events. Four years after, in 2014, the $M_w=8.2$ earthquake that hit the Northern regions of Chile, killed 7 people. In 2015 another earthquake with a magnitude of 8.4 struck the north and center of the country, leaving 15 casualties. And later, in 2016, a $M_w=7.6$ earthquake took place on the coast of the Los Lagos Region (South of Chile), where fortunately no one died. We could list many other seismic events that, while not having had fatal consequences, still caused damage and destruction to infrastructure (buildings, roads and houses) leaving large sections of the population homeless or living in precarious conditions.

In addition, the country has been facing alarming forest fires during the summer months. On average, there are around 5,000 fires that burn each summer, with the fires damaging up to 50,000 hectares approximately. Almost all of these fires, 99.7%³ of them, are caused by human action. And, of this total, 30% are started intentionally. Environmental conditions, such as a severe drought, which has affected the country for the last 8 years, combined with intense heat, low humidity and strong winds, create favorable conditions for the ignition of the combustible vegetation. This causes fires that destroy forests and sometimes, due to the proximity of the flames to urban areas, these fires also destroy buildings, houses and complete neighborhoods.

At the same time, Chile is undergoing deep demographic changes. We are currently in an advanced stage of the ageing population process. We are dealing with a sustained ageing of the population due to a decrease in the birth rate and an increase in life expectancy. With

¹ Moment magnitude scale

² Fallecidos terremoto y maremoto Chile 2010 - J. Lastra et al

³ Retrieved from: <http://www.conaf.cl/incendios-forestales/incendios-forestales-en-chile/>

a life expectancy of 79.86 years⁴, we are the country in South-America with the highest life expectancy.

In Chile, 3.224.540⁵ people are aged 60 years and older (older persons), which constitutes a 16.9% of the total population. Within this group, the percentage of women is greater than men (56.6% and 43.4% respectively), a larger difference than in any other age range. It is expected that by the year 2025 older people, will outnumber, for the first time, people under 15 years. Furthermore, it is projected that by 2030, more than 30% of the population will be over 60 years of age⁶.

The ageing population phenomenon is happening worldwide. Today, for the first time in history, the world's population aged 65 years and older outnumbers children younger than 5 years⁷. By 2050, the number of older people is expected to total 2 billion, up from 900 million in 2015⁸. However, the pace of population ageing is occurring more intensely and faster in developing countries. While France went through a 150-year demographic transition, in which older persons increased from 10% to 20% of the total population⁹. Chile, in only 60 years, went from 10% to 17% (today). This accelerated process has put us in a complicated scenario, where we need to quickly adapt to the actual needs of this age group, and design adequate public policies that address this demographic challenge.

The challenges faced by an ageing population globally require an approach that integrates all the actors of the global agenda. We need to take into account population aging through a multi-sectorial, holistic approach. As a country, and as a government, we are working thoroughly on putting older persons as a central priority of our agenda, designing public policies that promote positive aging, remove the negative image attached to being old and educate new generations to appreciate and recognize their key role in our society while at the same time preparing for when they enter this stage of life.

Emergencies and humanitarian crises affect different population to different degrees, depending on their age, sex, disability or other individual and social characteristics. Older people, and people with disabilities, are groups that tend to be more severely affected by these events and are often left behind during emergencies responses or relief, hindering their access to assistance and protection.

⁴ Retrieved from: <https://population.un.org/wpp/DataQuery/>

⁵ Retrieved from: <https://www.ine.cl/estadisticas/demograficas-y-vitales>

⁶ Retrieved from: <https://www.ine.cl/estadisticas/demograficas-y-vitales>

⁷ Retrieved from: <https://www.weforum.org/agenda/2019/03/there-are-more-people-older-than-65-than-younger-than-5-for-the-first-time-heres-how-thats-changing-the-world/>

⁸ Retrieved from: <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health>

⁹ Retrieved from: <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health>



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Having the elderly as a priority and considering the relevance and impact of natural disasters in Chile, the government, in a coordinated effort with civil society organizations, decided to design and adopt guidelines that incorporate the needs of older persons and people with disabilities in plans, programs and public policies related with to crises, emergencies and humanitarian action, making sure they are at the center of humanitarian responses.

This guideline is called “Minimum Standards for Age and Disability Inclusion in Humanitarian Action” and is based on the document with the same name created by the Age and Disability Consortium, a group of seven agencies working to promote age and disability inclusive humanitarian assistance, as part of ADACAP (Age and Disability Capacity Building Programme) and with the assistance and advice of many individuals and organizations. A working table between The National Service for Older People (SENAMA), The National Emergency Office of the Ministry of the Interior (ONEMI), PAHO/WHO (OPS/OMS) and the UN System, with the collaboration of the National Disability Service (SENADIS), the Ministry of Health (MINSAL) and the Ministry of Education (MINEDUC), was created to adapt the document to the Chilean context. After months of coordinated efforts, the document was adopted and, in the past several months, was published. The official launch, with government authorities and all actors involved, will be in June 2019. Then, the Minimum Standards will be handed to all humanitarian organizations and state agencies in charge of emergency and crisis response.

With these standards we want to secure the inclusion of older persons and people with disabilities. Both groups are affected by similar barriers to access emergency assistance, and there are simple measures included in this document that can be taken into account by humanitarian organizations and government agencies to address these barriers by adapting similar policies and programs. Hence, the standards are intended to inform and guide the design, implementation, monitoring and evaluation of humanitarian programs and policies; to strengthen accountability to older persons and people with disabilities; and to support advocacy, capacity-building and preparedness measures on age and disability across the humanitarian system, to ensure that older persons and people with disabilities receive humanitarian assistance that responds to their gender-specific vulnerabilities, needs and capacities. These standards are aimed at professionals who make decisions on humanitarian response to crises or emergencies, but with a special focus on municipal civil protection offices, since they are the ones who take on most of the humanitarian action and field work in Chile.

The minimum standards encompass eight key inclusion standards and accompanying sector-specific standards. The key inclusion standards are derived from the first eight of the Nine Commitments of the Core Humanitarian Standards on Quality and Accountability (CHS). Gender-sensitivity and protection are incorporated as cross-cutting themes across all



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standards, with protection also included as a set of sector-specific standards. The role of carers (care givers, caretakers) is also included as a cross-cutting theme; this represents a major aspect of inclusive humanitarian programming, that has not received the thoughtfulness it deserves.

Each set of sector-specific standards relates to a particular cluster (e.g. nutrition, health, emergency education). These are intended for use and application by humanitarian technical teams and coordination mechanisms, specifically clusters, with reference to the key inclusion standards; they are not designed to be used in isolation.

Each of the key inclusion standards and each set of sector-specific standards are supported by a series of related actions and designed to be relevant to all settings, including urban/rural communities and camp/non-camp settlement. Humanitarian organizations should employ the standards and implement those supporting actions that are directly relevant to their areas of programming. This means that, collectively, humanitarian actors, including coordination mechanism such as clusters, will use the minimum standards to the maximum extent possible, to ensure an inclusive response overall.

The minimum standards are based on the following general principles: principled humanitarian action, non-discrimination, meaningful access, respect for the inherent dignity of people with disabilities and older people, active and effective participation and equality of opportunities, respect for diversity, including equality between women, men, girls and boys of all age and recognition of the essential role of carers.

When older people and people with disabilities are affected by crisis there are eight key inclusion standards to follow. Firstly, they should be identified to ensure they receive assistance that is appropriate and relevant to their needs. Secondly, both groups should have access to the humanitarian assistance they need. Thirdly, they should not be negatively affected and be more prepared, resilient and less at-risk as a result of humanitarian action. Fourthly, they should know their rights and entitlements, have access to information and participate in decisions that affect them on an equal basis. Fifth, they should have access to safe and responsive mechanisms to handle complaints on an equal basis. Sixth, they should receive and participate in coordinated, complementary assistance on an equal basis. Seventh, both groups should expect improved assistance and inclusion as organizations learn from experience and reflection. Eight, they should receive the assistance they require from competent and well-managed staff and volunteers who are skilled and equipped to include them in humanitarian responses, and they have equal opportunities for employment and volunteering in humanitarian organizations.

In addition, there is a set of seven sector-specific standards; Protection, Water, Sanitation and Hygiene (WASH); Food Security and Livelihoods; Nutrition; Shelter, Settlement and Non-Food Items (NFIs); Health; Emergency Education. They all are presented in the same



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way. Each set of sector-specific standards contains their own standards, actions to meet each standard and at the end one or two case studies and a list of recommended documents for further guidance.

The key inclusion standards should be attainable from the early phase of an emergency. However, not all sector-specific standards will be equally applicable in this early stage. Yet, in situations of longer-term engagement during crisis-affected contexts, it should be possible to meet the standards more comprehensively. Humanitarian actors should use the actions recommended to meet each standard and to help identify what is immediately feasible and what requires action in the longer-term. If they anticipate and prepare to be inclusive in advance of an emergency, the needs of older people will be met more effectively during the emergency response.

In order to achieve the humanitarian principle of impartiality and humanitarian quality and accountability, it is key to have non-discrimination and inclusion of all vulnerable groups, such as older persons, as a central part of the response. Humanitarian actors must consider in their responses and programs, the need of all people affected, especially those in vulnerable groups and we think the most practical and accurate way to achieve this is by applying the minimum standards for age and disability inclusion in humanitarian action.