Expert Group Meeting on Older Persons in Emergency Crisis

OLDER PERSONS IN FORCED DISPLACEMENT- INTERSECTING RISKS

Analytical paper for Session III: Lessons learnt, gaps and challenges

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This paper is based on inputs provided by UNHCR staff during a 2019 internal consultation on the situation of older persons in forced displacement.

UNHCR is the global UN entity with a mandate to provide international protection and to work for solutions for refugees and asylum-seekers, among others. It has been granted the authority to supervise the application of international instruments for the protection of refugees and asylum-seekers, in particular the 1951 Convention relating to the Status of Refugees and its 1967 Protocol (hereinafter jointly referred to as the 1951 Convention). State parties to these instruments are required to cooperate with UNHCR in the exercise of its functions (Art.35 of the 1951 Convention). UNHCR’s role is also reflected in many regional refugee law instruments. Over the years, the UN General Assembly has expanded UNHCR’s mandate to various groups of people, who are not covered by the 1951 Convention. Some of these people are qualified as “mandate” refugees; others are returnees, statelessness persons and, in some situations, internally displaced persons (IDPs).

UNHCR has a direct interest in the situation of older asylum-seekers, refugees and stateless persons. UNHCR has a Policy on the Protection of Older Persons, which emphasizes the active role that older persons have in their communities and recognizes a number of challenges they face on displacement due to a loss of assets and breakdown in social support systems and being left behind when communities and flee and when they return to countries of origin.\(^1\) UNHCR’s Age, Gender and Diversity (AGD) Policy further sets out that “older persons may face heightened protection risks, as a result of aging factors alone or in combination with other individual characteristics. The specific risks older persons may face can be the result of physical or mental conditions but can also result from obstacles encountered due to societal perceptions and the interactions of an individual with his or her environment”, and that “older people can play vital roles in their households and communities, for example as transmitters of knowledge, culture and skills”.\(^2\)

Background

As of June 2018, 70.4 million people were forcibly displaced worldwide as a result of persecution, conflict and generalized violence. These numbers include 20.2 million refugees under UNHCR’s mandate (a figure exceeding 20 million for the first time), 3.2 million asylum seekers and 39.7 million internally displaced persons (IDPs).\(^3\) 5.2 million people were newly

\(^2\) Policy on Age, Gender, and Diversity, UNHCR/HCP/2018/1, Annex 1 Complementary Note on Age, Gender and Diversity
displaced in the first half of 2018\textsuperscript{4}. Based on available data, 3\% of refugees were over 60 years of age in 2017. However, social and cultural determinants of age mean that refugees and other displaced populations can often be considered to be ‘older’ at a much younger age and therefore make up a larger portion of the displaced population.

In 2017, 85\% of displaced persons were hosted in developing regions\textsuperscript{5}, where service systems, including services required by older persons, are already under pressure and capacity to scale up these systems is limited. Further, forcibly displaced older persons often face additional obstacles to integrating into their host communities, due to having fewer opportunities for participation and building of social networks, such as through education or work.

Older persons face particular risks in forced displacement. They often face difficulties fleeing and may be left behind by other family and community members, including to look after property. Protection risks are heightened for older persons living in insecure contexts, where humanitarian actors may not have access.

As families are separated and community structures break down on displacement, older persons may become isolated, or required to take on new roles as heads of household, with care for children and other dependent family members. Due to mobility difficulties, health conditions, disabilities or caregiving responsibilities for family members, many older persons face barriers to accessing humanitarian assistance, such as food and non-food item (NFI) distributions; and obstacles to accessing water and fuel. Older persons also face heightened risk of human rights abuses, including violence, exploitation and abuse; as well as restrictions on the right to work and the right to health, as set out further below.

Despite facing heightened risks, older persons are often less visible in assessment and planning processes, including due to a focus in humanitarian action often being on younger age groups, and due to a lack of disaggregation of data at higher age brackets. These challenges to inclusion of persons with disabilities in humanitarian action is exacerbated by limited explicit requirements by donors for reporting on how projects and programmes benefit this age group.

It is essential to recognize that older persons have important roles in displaced communities, including in preserving cultural heritage and connection with countries of origin. However, response to forced displacement often focuses on vulnerability and does not recognize the important roles and capacities of older persons or enable their participation in decision-making.

Relevant International Frameworks

Global Compact on Refugees

The Global Compact on Refugees (GCR)\textsuperscript{6} includes a total of 8 references to older persons and a further 8 references to age. The GCR calls for a strong partnership and participatory approach to response to refugee movements, including participation by older persons. The GCR also identifies older persons as having specific needs to be addressed in refugee response; while calling for States and other stakeholders to promote economic development

\textsuperscript{4} UNHCR Mid-Year Trends 2018  \url{https://www.unhcr.org/en-au/statistics/unhcrstats/5c52ea084/mid-year-trends-2018.html}

\textsuperscript{5} \url{https://www.unhcr.org/statistics/unhcrstats/5b27be547/unhcr-global-trends-2017.html}

and access to work, including for older persons. It further recognizes the important role that sports and cultural activities play and makes a commitment to increasing access to sporting and cultural facilities and activities in refugee-hosting areas, including for older persons. Older persons are highlighted as a group to benefit from an expansion and enhancement of national health care systems to facilitate access by refugees and host communities; and are specifically mentioned as a group to have access to sufficient, safe and nutritious food. In relation to return to countries of origin, the GCR emphasizes older persons where setting out the need for support to livelihoods, development and economic issues, as well as measures to address housing, land and property issues.

**Guiding Principles on Internal Displacement**

2018 marked the 20th anniversary of the Guiding Principles on internal Displacement, which restate the principles of international human rights, humanitarian and refugee law applicable to IDPs and address their specific needs worldwide. The Guiding Principles also identify rights and guarantees relevant to the protection of persons from forced displacement and their protection and assistance during displacement as well as return or resettlement and reintegration.

Under Paragraph 2 of the Guiding Principles, the Guiding Principles addresses the situation of vulnerable groups of IDPs, for example, unaccompanied children, expectant mothers, persons with disabilities or older persons and emphasizes that they are entitled to the protection and assistance required by their condition and to treatment that takes into account their special needs. This is also mentioned in the Article 9.2.c of the African Union Convention for the Protection and Assistance of Internally Displaced Persons in Africa (Kampala Convention). Moreover, the specific needs and human rights concerns of IDPs do not automatically disappear when a conflict or natural disaster ends, rather the displaced—whether they return to their homes, settle elsewhere in the country or try to integrate locally—usually face continuing challenges requiring support until they achieve a durable solution to their displacement.

**Human Rights Impact**

**Right to Housing**

Older refugees and IDPs living outside of camps often have difficulty accessing housing on the local market due to high costs and limited purchasing power, particularly for older persons who have become heads of households on displacement. Further, the right to housing can be at risk when they return to their places of origin. On return, many older persons have limited access to secure housing, as their housing has been destroyed or taken over by younger family members.

**Access to Documentation and Right to Social Security, Including Social Insurance**

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9 Ibid.
10 Article 9.2.c. of the Kampala Convention- “Provide special protection and assistance to internally displaced persons with special needs, including separated and unaccompanied children, female heads of households, expectant mothers, mothers with young children, the elderly, and persons with disabilities or with communicable diseases:
Forcibly displaced older persons face numerous obstacles to accessing social protection systems, including pensions\(^\text{12}\). Refugees often do not have access to national systems due to their refugee status.

A lack of documentation is a key factor impacting on access to pensions for both refugees and IDPs. Identity documents may be left behind or lost during flight and restrictions on freedom of movement may present a significant obstacle, such as encampment policies, besieged areas and lack of security. For IDPs, this can be exacerbated as IDPs do not undergo biometric registration. For refugees, mobility difficulties can hinder access to registration, where mobile registration or other accessible options are not available.

Difficulties accessing pensions limits independence and autonomy and increases protection risk through promoting dependence. Lack of access to social protection systems and resulting poverty may also result in negative coping mechanisms, such as reduced food intake.

**Right to Work**

In situations of forced displacement, older persons are often excluded from opportunities to work due to discrimination on the basis of both age and refugee/ IDP status. In many countries, refugees do enjoy the right to work, or refugee/ IDP camps and settlements may be located far from economic centres. Further, livelihoods programmes implemented by humanitarian actors often have a cut-off age or do not recognize the skills and capacities of older persons who want to work.

**Right to Health**

In situations of forced displacement, older persons face numerous barriers to accessing health care. Older persons with health conditions or disabilities may have difficulty reaching health centers, especially when displaced populations are dispersed in remote locations. Health programming may overlook the needs of older displaced populations. For example, vaccination and nutrition programmes may prioritize children, despite older persons facing significant risk. Further, health programming in humanitarian response may not prioritize interventions more often needed by older persons, such as non-communicable disease care and prevention, and access to assistive devices\(^\text{13}\). Forced displacement, with associated loss and breakdown in social networks, presents significant mental health and psychosocial support needs for many older persons\(^\text{14}\). However, funding for mental health and

\(^{12}\) For example, a study in conflict- affected areas of Ukraine found that 99.3% of older persons rely on pensions as their main source of income. Humanitarian Needs of Older Women and Men in Government Controlled Areas of Donetsk and Luhansk Oblasts, Ukraine- Snapshot of baseline report, July 2018. (conducted under the HelpAge project- ‘Emergency protection-based support to conflict affected older women and men in the GCAs locations of Donetsk and Luhansk oblasts’)

\(^{13}\) For example, a study in conflict- affected areas of Ukraine found that 53.4% of older persons reported that they are in need of assistive devices. Humanitarian Needs of Older Women and Men in Government Controlled Areas of Donetsk and Luhansk Oblasts, Ukraine- Snapshot of baseline report, July 2018. (conducted under the HelpAge project- ‘Emergency protection-based support to conflict affected older women and men in the GCAs locations of Donetsk and Luhansk oblasts’)

\(^{14}\) For example, a study in conflict- affected areas of Ukraine found that 96.4% of older persons were experiencing conflict- related psychosocial issues. Humanitarian Needs of Older Women and Men in Government Controlled Areas of Donetsk and Luhansk Oblasts, Ukraine- Snapshot of baseline report, July 2018. (conducted under the HelpAge project- ‘Emergency protection-based support to conflict affected older women and men in the GCAs locations of Donetsk and Luhansk oblasts’
psychosocial support is often limited, and where such services are in place, they often prioritize younger age groups.

**Protection from violence, exploitation and abuse**

Older persons in situations of forced displacement are at heightened risk of violence, exploitation and abuse. Older women, in particular, are at heightened risk of sexual and gender based violence. Violence occurs inside and outside the home, such as when collecting firewood. Further, older persons are often less visible to humanitarian actors delivering programmes for prevention and response to violence, exploitation and abuse. It may be incorrectly assumed that older women do not experience sexual and gender based violence, or that older persons are cared for by families. Barriers to reporting include limited mobility and communication difficulties due to language, hearing or visual impairments.

Other risks including neglect and/or abandonment, exploitation by family members, emotional abuse and lack of control over assets and decision-making, are often exacerbated in situations of forced displacement, as older persons are separated from community support and familiar service structures; and their roles in the family and community may be undermined.

**Right to freedom of opinion and expression and access to information**

Technologies are increasingly being used to support delivery of humanitarian assistance, including through the provision of information and feedback/complaints mechanisms, as well as delivery of administrative processes. For example, information to affected populations is in many contexts delivered through mobile phone applications; and in Ukraine, applications for passes to cross the line of contact are required to be completed online. However, older displaced people are at risk of being left behind due to unfamiliarity with mobile phones and technologies; unequal power relations within households that may deny older persons access to mobile phones; as well as hearing and visual impairments and cognitive impairments such as dementia.

Even where technology does not present an obstacle, language barriers can be exacerbated for older persons who often have fewer opportunities to learn a new language and are more likely to speak local languages not used by humanitarian actors.

**Examples of promising practice**

UNHCR operations globally have reported a number of examples of how older persons are being supported, including through community outreach workers delivering psychosocial activities, awareness sessions and recreational activities in Syria; establishment of Social Mutual Aid Committees in remote villages in Chad, in response to concerns highlighted by older persons; assistance to construct shelters and weekly visits by a specialist nurse in Zimbabwe; provision of assistive devices targeted to older persons in Sri Lanka; adaptation of livelihoods programming to improve access for older persons in Nepal; and improved

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15 For example, a study in conflict-affected areas of Ukraine found that 20.5% of older persons (75.8% women) reported experiencing some form of violence or abuse. Humanitarian Needs of Older Women and Men in Government Controlled Areas of Donetsk and Luhansk Oblasts, Ukraine- Snapshot of baseline report, July 2018. (conducted under the HelpAge project- ‘Emergency protection-based support to conflict affected older women and men in the GCAs locations of Donetsk and Luhansk oblasts’).
communication with older persons in Malaysia through information hubs and community meetings.

UNHCR operations also report numerous initiatives that recognize the roles of older persons in their communities. For example, in Greece, older refugees established a network of experienced women to support pregnant female heads of households; in Lebanon older persons engage as outreach volunteers and are active at the community centers; and in India community-run older persons’ clubs received cash grants under a community-run project.

In a number of countries important progress is being made towards improving inclusion of refugees and IDPs in national systems, including pensions. For example, in Brazil in 2017, the Brazilian Supreme Court made a decision for immigrants’ entitlement to access the Continuous Financial Benefit, a social assistance grant offered by the Brazilian Government to persons over 65 years old and persons with disabilities.

Recommendations for inclusion of older persons in response to forced displacement

• Ensure non-discrimination in livelihoods programming, providing choice and options for forcibly older persons who wish to work. This includes enabling participation by older persons in the design of livelihoods programming, recognizing the skills of older persons (such as by engaging them as trainers and mentors), and adapting programming to improve accessibility for older persons with disabilities.

• Ensure the needs of older persons are reflected in health programming in humanitarian response. This includes improving access to assistive technology and non-communicable disease care; as well as ensuring non-discriminatory access to nutrition programmes, mental health and psychosocial support, and prevention and treatment of communicable diseases. Provide outreach or mobile services to reach more isolated older persons or those with limited mobility.

• Reduce the risk of violence, exploitation and abuse of older persons. This includes improving access to referral pathways and including older persons in all sectoral dimensions of work to prevent, mitigate and respond to SGBV (including safe energy, health, access to justice, shelter, and psycho-social support). This also includes raising awareness among humanitarian actors of the risks for older persons and improving accessibility of reporting mechanisms for individuals with hearing, visual or cognitive impairments, and those who use minority languages.

• Conduct research on the impact on older persons of the use of technology in humanitarian action and effective measures to ensure that older persons are not left behind.

• Recognize the important roles of older persons in forced displacement and work with communities to strengthen these roles, such as by engaging older persons in conflict

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16 UNHCR Age, Gender and Diversity Accountability Report, 2017 [https://www.refworld.org/pdfid/5bd03df04.pdf](https://www.refworld.org/pdfid/5bd03df04.pdf)

17 UNHCR Age, Gender and Diversity Accountability Report, 2017 [https://www.refworld.org/pdfid/5bd03df04.pdf](https://www.refworld.org/pdfid/5bd03df04.pdf)

18 UNHCR Age, Gender and Diversity Accountability Report, 2017 [https://www.refworld.org/pdfid/5bd03df04.pdf](https://www.refworld.org/pdfid/5bd03df04.pdf)
resolution activities. Avoid inadvertently undermining the roles of older persons, such as by duplicating existing community leadership structures.

- Provide access to national systems, including social protection, for refugees and IDPs, including through legislative change.

- Ensure access to documentation, including identity documents, for displaced older persons. Consult with displaced older persons to identify and address barriers to access, such as reliance on technologies, restrictions on mobility and administrative hurdles. Provide mobile registration and other accessible mechanisms for all those forcibly displaced.

- Increase funding to address the needs of older persons in forced displacement. Address under-prioritization of older persons through highlighting the importance of their inclusion in funding applications.

- Require humanitarian actors to report on how humanitarian programmes are reaching and responding to the needs of older persons, including through age-disaggregated data.