

**Statement to the 50th session of the Commission on
Population and Development:
Changing population age structures and sustainable development
3-7 April 2017**

Delivered by Cynthia Stuen, International Federation on Ageing

Excellences, ladies and Gentleman, on behalf of the Stakeholder Group on Ageing, we congratulate the Commission on its 50th anniversary.

The Stakeholder Group on Ageing, comprising 11 organizations and networks focused on ageing, would like to draw attention to the following points on the occasion of this commission which is focused on changing age structures and development.

The 2030 agenda is underpinned by the pledge to "leave no one behind". It is therefore imperative, that older persons not be left behind when Members States look to implementing the 2030 Agenda.

We would like to highlight our concerns on specific issues which affect older persons around the world: Income Security, Health and Care, and Violence and Abuse.

First, in examining these issues let's look at Goal 1: poverty.

In low and middle-income countries (LMICs), understanding of income security in older age is usually limited to a single measure: "old age poverty" which takes the income and expenditure for a household and divides it among its members. This approach has a number of limitations and is based on assumptions including that resources are equally shared in a household and that different ages have the same consumption needs. It does not adequately reflect the situation of an older person. Forthcoming research by HelpAge in four countries shows that measurement of poverty in old age is highly sensitive to changes in these assumptions. Our recommendation is to take a more multi-dimensional approach when assessing income security. We would like to see a comprehensive approach which paints a broad picture to include key sources of income in old age such as: work, private transfers from and for families, public transfers (i.e. pensions) income from savings and assets, and study their adequacy, predictability and regularity.

Let's now turn to health and care.

Currently health indicators and targets often fail to adequately monitor progress on older persons. Target 3.8 on Universal Health Care, including vaccines for all, is a case in point. The proposed indicator to measure UHC includes measures of hypertension and diabetes. However, the mechanisms used for data collection on these indicators, The DHS, Demographic Health Survey, the WHO's STEPS NCD Risk Factor Survey, (STEPS) exclude women aged 50 and over and men aged 54 or 59 and over in the DHS data, and persons 64 and in some instances 74 in the STEPS. Preventative vaccines across the lifespan are lifesavers. The WHO is supportive of the Global Vaccine Action Plan 2011-2020. SDGs call for vaccines for all, we must not leave older persons behind.

The absence of attention to older persons is also true in relation to Non communicable Diseases (NCDs). The WHO's NCD Global Monitoring Framework uses an age-bracketed indicator limited to aged 30-70 despite the fact that people are more likely to have NCDs as they age.

When it comes to the Care of older persons, more data is needed on unpaid care; this includes care that older persons themselves provide around the world. SDG targets recognise unpaid care, including through social protection policies, however it does not provide for the role of older persons in the provision of care. The issue is with the indicator, the measurement is based on time spent on unpaid domestic care work, which is not age-restricted, however, analysis of the meta data has shown that less than half the countries have data disaggregated by age to make a proper measurement of the target.

Third and finally, we look at the issue of Violence and abuse. National Surveys on ageing do not take advantage of gathering data on this issue. Although Agenda 2030 calls for elimination of all forms of violence, abuse, and discrimination, only 17% of 133 countries and these are primarily high income countries, report on this issue. In one region 28% of women aged 60-97 have been victims according to these reports. This is from the sample set of only 45% of women actually reporting. Both men and women over 50 in LMICs reported at least one form of abuse. All too often, data on violence against women is limited to ages 15-49 reflecting the focus on asexual and reproductive health at the expense of rights across the life course.

133 countries report having a law against elder abuse. Data is urgently needed to measure implementation.

I thank you on behalf of the SGA, and ask that our findings and recommendations be considered to insure no one is left behind.