

Implementation Tips for USAID Partners

Sharing Resources and Knowledge Among the Global CSO Community

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Definitions

Older People: A term used to describe someone in later life, which can vary depending on a country's life expectancy. For statistical purposes, age 60 and over is frequently used to describe older people.

Protection: Ensuring full respect for the rights of the individual in accordance with the letter and spirit of relevant bodies of law—i.e., human rights law, international humanitarian law, and refugee law. Human rights and humanitarian organizations must conduct their activities in an impartial manner (free from discrimination based on race, national or ethnic origin, language, or gender).

Barriers: Factors that prevent a person from having full, equal access and participation in society. Barriers can be environmental (physical, attitudinal, or communication-related), or institutional (such as policies that can lead to discrimination against certain groups).

Enablers: In the context of humanitarian inclusion, enablers are the factors that facilitate access and participation in society for older people with disabilities.

Disaster Risk Reduction (DRR): A systematic approach that prevents new risk and reduces existing risk (particularly socio-economic vulnerabilities) as well as environmental and other hazards.

Humanitarian and Emergency Response

Q How can we ensure that humanitarian and emergency response is inclusive of older people and their needs?

A The Situation of Older People in Crisis

Older people (defined by the United Nations as people ages 60 and over) are the world's fastest growing demographic group. By 2050, one in five people will be "older." Eighty percent of this group will live in developing countries, where disasters are more likely to occur.

Humanitarian principles mandate that assistance be provided to everyone in need, without discrimination. In humanitarian crises, however, older people are often the last to receive support and the most routinely overlooked. Distant aid centers and long lines prevent those who have difficulty walking or standing from accessing relief; washing facilities and toilets are rarely adapted for those with limited strength and mobility; and essential medicines for non-communicable diseases (NCDs)—which disproportionately affect older adults—are always in short supply, as are assistive devices. Indeed, access to critical services, including food, shelter, protection, psycho-social support, health care, and water/sanitation/hygiene (WASH) are often more difficult to access for those who are older.

Barriers also exist that prevent older people from participating in decision making and accessing information that directly affects their well-being and security in a crisis. Data from humanitarian situations consolidated from rapid needs assessments in seven countries showed that 79 percent of older people had not been consulted by humanitarian agencies about services provided to them, and 70 percent did not know how to report an issue with humanitarian assistance.¹ When older people are left out of consultations, emergency responses often overlook their needs.

Gaps in humanitarian financing pose another significant barrier to older people in crisis. In a study of 1,900 funded humanitarian projects, only five were dedicated to addressing the needs of older people.² Mortality rates, however, indicate that older people are

1 HelpAge International, Consolidated Rapid Needs Assessment (RNA) data from Philippines, Indonesia, NE Syria, South Sudan, Malawi, Mozambique (Sofala), Mozambique (Tete), Zimbabwe
2 HelpAge, [End the neglect: a study of humanitarian financing for older people](#)

Definitions, cont.

Intersectionality: The interaction of multiple factors—such as disability, age, and gender—which can create multiple layers of discrimination as well as legal, social, or cultural barriers. This interaction can further hinder a person's access to and participation in humanitarian action and, more generally, in society.

Older People's Associations (OPAs):

Community-based organizations that mobilize older people to improve their own lives and contribute to the development of their communities across multiple domains.

Voice: “Voice” means ensuring people can access information, participate in decisions that affect their lives, express their opinions and have those opinions heard, and meet and debate with others.

Protection Clusters: Protection clusters are groups that bring together partners (humanitarian agencies and other NGOs) that have necessary expertise, resources, access, and capacity to work towards common humanitarian objectives. They exist at the inter-agency, regional, country, and field levels and are coordinated through UNHCR, the global cluster lead agency for protection. See: [Global Protection Cluster](#) and [UNHCR Protection Clusters](#)

highly vulnerable in a crisis: 75 percent of those who died in Hurricane Katrina in the United States (2005) were over the age of 60; 56 percent of those who died from the Tsunami in Japan (2011) were over the age of 65;³ and 40 percent of those who died in Typhoon Haiyan in the Philippines (2013) were over the age of 60.⁴

Humanitarian systems tend to design, fund, and deliver responses based on existing humanitarian data—which is a major reason older people (who are often not included in information gathering) remain neglected. Existing data, such as some sector-specific indicators for WASH, nutrition, and protection, are not systematically disaggregated by age. This also obscures the specific needs and challenges of older people.⁵

Why is it important for us to consider age and include older people in humanitarian programs?

Older people are more vulnerable in times of disaster (such as climate-related shocks and violent civil conflict) and face greater challenges recovering their livelihoods. The intersectionality (see Definitions) of old age, gender, and disability also places older adults at higher risk during a humanitarian crisis. Those with physical challenges are less able to flee during an emergency and can easily be separated from their families. Older women, especially those living with disabilities, are disproportionately affected.

Embedding age-inclusive practices in humanitarian programming has broad-reaching benefits. Such practices also make communities safer, equitable, and more resilient. Older people can contribute significantly to emergency planning and mapping; many have accumulated coping techniques and knowledge of environmental hazards over the course of their lives. Input from older people in assessments has improved the speed and reach of food distribution, as well as the accessibility of shelters and latrines.

Increasing access to humanitarian relief for older adults benefits younger generations as well—not least because today's young are tomorrow's old. In disaster-prone regions such as sub-Saharan Africa, it is common for older people to be responsible for dependent children. A rapid needs assessment in Sofala, a province in Mozambique affected by Cyclone Idai in March 2019, found that 81 percent of older people surveyed were caring for an average of three children.⁶ Research has indicated that “skipped generation” households (households consisting of grandparents and

3 HelpAge, [Displacement and older people: the case of the Great East Japan earthquake and tsunami of 2011](#)

4 HelpAge, [More at risk: How older people are excluded in humanitarian data](#)

5 HelpAge, [Older people in displacement: Falling through the cracks of emergency responses](#)

6 HelpAge, [Rapid needs assessment of older people cyclone Idai, Sofala Province, Mozambique](#)

Resources

Humanitarian Inclusion

[The Humanitarian Inclusion Standards for Older People and People with Disabilities](#)

[Humanitarian Action and Older Persons: An Essential Brief for Humanitarian Actors](#)

[Age and Disability Capacity Program](#)

[Protecting Older People in Emergencies: Good Practice Guide](#)

[Missing Millions: How Older People and People with Disabilities are Excluded from Humanitarian Response](#)

Inclusive Data Practices

[Inclusive Data Charter](#)

[Washington Group on Disability Statistics](#)

[How Data Systems Leave Older People Behind](#)

grandchildren, where no parent is present) have a markedly higher incidence of poverty and are therefore more vulnerable during and after an emergency.⁷

How can my organization make humanitarian programs more age-inclusive?

Ensure older beneficiaries are included in humanitarian data systems

- **Collect and analyze data disaggregated by sex, age, and disability.** Data on older people should be collected, analyzed, and reported in all humanitarian information management systems. This should occur at every stage of humanitarian response—from initial rapid needs assessments to post-response evaluations. Because the prevalence of disability increases with age, identifying older people with disabilities in humanitarian settings is crucial for responders to provide accessible services. The Washington Group Questions are an important resource for disability-inclusive data practices.⁸ For more information on the Washington Group Questions, see the *Implementation Tip* on [Advocating for the Rights of Persons with Disabilities](#).
- **Remove the use of upper age limits in surveys of people affected by humanitarian crises.** Data gathered for important indicators such as violence and abuse in humanitarian settings often exclude people over the age of 49. When data are available, they may not be disaggregated by age. These practices lead to the design of policies that do not account for older adults in prevention strategies and critical social services. Lack of information about older people also perpetuates false assumptions about their situations and behaviors.
- **Set inclusive data indicators.** Humanitarian actors should assess to what extent current indicators of performance and success include older people. Consider incorporating specific indicators and targets that measure accessibility—such as the percentage of older people who can use available latrines or collect distributed food. When developing indicators, consider measuring the barriers and enablers (see Definitions) to access across human needs, such as health, nutrition, WASH, and shelter.

Promote meaningful participation

- **Consult older people and ensure they are aware of and can access feedback mechanisms.** Humanitarian practitioners should consult with older people at each phase of the humanitarian process and take steps to integrate their feedback into program

⁷ Barrientos, A., [Ageing, poverty, and public policy in developing countries: New Survey Evidence](#)

⁸ Age and Disability Capacity Program, [Humanitarian inclusion standards for older people and people with disabilities](#)

Case Study

In Turkana, Northern Kenya, ongoing drought has put older people at risk of food insecurity. In order to improve the effectiveness of cash grants to older people, HelpAge International introduced a “help desk committee” as a component of its humanitarian response. Committees consist of volunteers from the local community who handle feedback and complaints and then liaise with project staff and partners to find solutions. The consultations with older people facilitated by the help desks have led to improved security and transparency of grant distributions. In response to feedback provided by older people, larger, lump sums have been introduced so that households can better meet financial obligations.¹⁰

¹⁰ HelpAge, [Help desks in Kenya](#)

design and implementation, whether that involves integrating their feedback into assessments, collaborating with partners for technical support, or coordinating targeted outreach to affected communities. Older People's Associations (OPAs) are a valuable channel through which to collect feedback and input from older people.

- **Strengthen older people's capacity and leadership in emergency preparedness, response, and recovery.** Support older people as participants and speakers in coordination mechanisms (such as protection clusters and working groups) as well as sector-specific assessments (such as focus groups on responding to gender-based violence). Contact a local OPA to connect with older people about attending these forums. If no OPA exists, coordinate with humanitarian partners and older people in the affected community to establish an OPA or group where older voices can be heard. Actively seek and create opportunities to strengthen the voice (see Definitions) of older people in humanitarian contexts.
- **Consider ways older people can contribute to disaster risk reduction (DRR) initiatives (see Definitions).** With the increasing frequency and severity of natural disasters, many countries are realizing the importance of disaster preparedness and response planning. Older people are an underutilized resource in DRR, due to the prevailing misconception of older people solely as aid recipients, rather than as active contributors to emergency planning and risk mitigation. If your organization contributes to or promotes DRR, make sure older people are explicitly referenced in disaster management and climate policies—to mainstream their inclusion in planning, budgeting, training, and response.⁹

Improve access to humanitarian services

- **Conduct an audit on accessibility of services and facilities.** Identify where barriers exist for older people—particularly related to freedom of movement, service utilization, social stigma, and communication—and needed accommodations for physical, sensory, and intellectual disabilities as well as low literacy. Identify partners among non-governmental organizations, community groups, United Nations field protection clusters (see Definitions), and government ministries that can help mitigate barriers to access.
- **Train staff and volunteers in including older people and people with disabilities.** People from all levels and disciplines of the humanitarian workforce should be trained on the importance of inclusion, barriers faced by marginalized groups, and best practices for delivering interventions that are age- and disability-inclusive. Training should enable participants to confront their own

⁹ HelpAge, [Disaster Risk and Age Index](#)

For More Information

For this or other issues of *Implementation Tips*, please visit [NGOConnect.net](https://ngoconnect.net).

The website is a dynamic and interactive portal dedicated to connecting and strengthening CSOs, networks, and CSO support organizations worldwide.

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internalized biases about older people and address the implications of intersectional discrimination based on gender, age, and disability. The Resources section lists sources that can be used for providing training on inclusion.

- **Ensure that health services, products, and medicine that support older people's health and functioning are available.**

In humanitarian crises, older people's health and well-being can deteriorate quickly in the absence of access to health services for chronic conditions (NCDs) such as cardiovascular disease, stroke, diabetes, and dementia. Older people may also require rehabilitation, assistive devices, or palliative care. Build partnerships and/or communication channels between humanitarian and development actors that improve older people's access to holistic, person-centered care. In situations involving internally displaced people or refugees, health and social services may be located outside camps and in host communities.

