

## Ageing and disability roundtable: Monrovia High Level Panel meeting, 2013

### Why a focus on ageing and disability is needed

The Millennium Development Goals (MDGs) have galvanised international support for development. They have enabled important progress in human development through their focus on poverty, hunger, children, HIV and AIDS, education and aid disbursement. However, it is recognised that there are constraints to progress within the existing framework. The 2012 report of the UN System Task Team states that *'the poorest and those most discriminated against on the basis of gender, age, disability, ethnicity or otherwise have often been the most disadvantaged.'*<sup>1</sup>

Age and disability are two separate, but related areas that the MDGs have not addressed adequately. It is clear that the inequalities associated with age and disability, independently and together, have constrained the ability of the international community to achieve its aspirations of tackling poverty.

### Why ageing and disability are important

#### Ageing

The world is ageing rapidly and will continue to do so over the coming century. A sustainable and prosperous world will be one where people of all ages and abilities are supported throughout their lives. Globally, more people are over the age of 60 than children under 5; by 2030, people aged over 60 will outnumber children under the age of 10.<sup>2</sup> The fastest demographic transition is happening in developing countries with profound implications for older people, households, community infrastructure, and social policy.<sup>3</sup> Older people face age discrimination which constrains their access to essential services. Widespread toleration of age discrimination leads to human rights abuse in older age.<sup>4</sup>

#### Disability

Between 15 and 20 per cent of the population worldwide live with some form of disability,<sup>5</sup> with between 2 to 4 per cent of the global population living with a severe disability.<sup>6</sup> 80 per cent of people with disabilities live in developing countries and face a greater risk of living in poverty.<sup>7</sup> They face barriers to participation in society, such as accessing development programmes and funds, education, employment, healthcare, communication and transportation services. The UN Convention on the Rights of Persons with Disabilities sets out the rights of persons with disabilities, and it is crucial that the new development framework is compliant with its articles.

Ageing is also associated with a higher probability of living with a disability. Worldwide, more than 46 per cent of people aged 60 years and over live with disabilities, and in some low income countries 43 per cent of people aged 60 or above live with a disability.<sup>8</sup> Worldwide more than 250 million older people experience moderate to severe disability.<sup>9</sup>

Both people with disabilities and older people face enhanced risk to the effects of climate change, such as natural disasters and food insecurity; they are also more vulnerable in situations of conflict.

### Economic significance of ageing and disability

#### Ageing

About 340 million older people live without secure incomes; this number may rise to 1.2 billion by 2050.<sup>10</sup> Between 15-30 per cent of older people live alone or with no adult of working age.<sup>11</sup> Older people, and people living in households with older people, face higher levels of poverty.<sup>12</sup> The economic impact of non-communicable diseases (NCDs) has been

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<sup>1</sup> UN System Task Team, *Realizing the future we want for all: Report to the Secretary-General*, New York, 2012, p.5

<sup>2</sup> Population Division of the Department of Economic and Social Affairs of the United Nations Secretariat, *World Population Prospects: The 2010 Revision*, <http://esa.un.org/unpd/wpp/index.htm>

<sup>3</sup> UNFPA/HelpAge International, *Ageing in the Twenty-First Century: A Celebration and A Challenge*, New York/London, UNFPA/HelpAge International, 2012, pp.9,12

<sup>4</sup> Ibid p.60

<sup>5</sup> Including those resulting from mental health impairments.

<sup>6</sup> World Health Organization, *Global Burden of Disease*, Geneva, World Health Organization, 2008

<sup>7</sup> A/RES/66/124 High-Level Meeting of the General Assembly on the Realizations of the Millennium Development Goals and other Internationally Agreed Development Goals for Persons with Disabilities

<sup>8</sup> World Health Organization, *World Report on Disability*, Geneva, World Health Organization, 2011, p.27

<sup>9</sup> UNFPA/HelpAge International, *Ageing in the Twenty-First Century: A Celebration and A Challenge*, New York/London, UNFPA/HelpAge International, 2012, p.61

<sup>10</sup> Meissner M, 'Ways out of old-age poverty', 2010. Available at: [http://www.dandc.eu/articles/178158/index\\_p.en.shtml](http://www.dandc.eu/articles/178158/index_p.en.shtml).

<sup>11</sup> Masset E and White H, 'Are chronically poor people being left out of progress towards the Millennium Development Goals? A quantitative analysis of older people, disabled people and orphans', *Journal of Human Development*, 5(2), 2004, pp.279-297

<sup>12</sup> UNFPA/HelpAge International, *Ageing in the Twenty-First Century: A Celebration and A Challenge*, New York/London, UNFPA/HelpAge International, 2012, Chapter 4

recognised as one of the greatest challenges for developing countries. Ageing is classified as one of the four key drivers of NCDs, with three quarters of NCDs occurring in the over 60 age group, and 71 per cent of total deaths from these diseases occurring in people over 70.<sup>13</sup> Low-cost diagnosis and prevention interventions, no matter what a person's age, will enable people to continue to contribute to society.<sup>14</sup>

Older people continue to make substantial economic and social contributions to society, in many countries older people are main breadwinners, and where children have been orphaned by HIV and AIDS, many older people are primary carers.<sup>15</sup>

### **Disability**

Disability is linked to a higher probability of being poor.<sup>16</sup> People with disabilities often have higher healthcare costs, and frequently face social and political marginalisation.<sup>17</sup> Disability is complex and multidimensional – how the individual experiences disability depends not just on the functional limitations relating to their impairment, but also on the environment. Negative attitudes towards disability mean that people with disabilities routinely experience discrimination which can deny them equitable access to resources, services, and opportunities for personal development, including employment.<sup>18</sup> In Bangladesh, the cost of foregone income from lack of schooling and employment of people with disabilities and their caregivers is estimated at US\$1.2 billion annually, or 1.7 per cent of GDP.<sup>19</sup> Environmental barriers include those in the built environment, such as inaccessible public buildings, and those relating to communication, including lack of information in accessible formats.

### **Ensuring equitable and sustainable outcomes**

Sustainable outcomes for the post-2015 framework require a framework that fosters equity and inclusion. The new sustainable development framework must enable a focus on the poorest, most marginalised groups, such as people with disabilities and older people. The framework needs to be driven by a human rights-based approach, with equality and non-discrimination as priority themes.

There is agreement among disability and ageing groups that **a cross-cutting goal on equality and non-discrimination, 'Promote equality and tackle discrimination in all its forms'**, would help ensure people with disabilities, older people and other marginalised groups are included across all goals and targets.<sup>20</sup>

Any action within a post-2015 framework must also be rooted in a solid quantitative as well as qualitative evidence base for it to be sustainable and meaningful. The lack of data and monitoring mechanisms on ageing and disability means that the situation of older people and people with disabilities is often invisible.<sup>21</sup> Therefore, **disaggregation of data by disability and age group should be required in all targets established under the new framework** to ensure that older people and people with disabilities benefit equally from future development progress. Better data gathering will also allow better monitoring of the distributional impact of policies and budget allocations on different populations.

Equity would also be strengthened by ensuring health-related goals are relevant for people at all ages of their life. **A goal on healthy life expectancy with targets to measure life expectancy from birth (already a core component of the HDI) and healthy life expectancy at 60** could lead to more effective interventions for all age groups.<sup>22</sup>

The sustainability of post-2015 actions will require political will and policy innovation. International and national efforts are required to mobilise resources to support all vulnerable citizens to tackle poverty. **A goal on delivering the universal adoption of social protection floors** for all people would greatly support these efforts.<sup>23</sup>

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<sup>13</sup> World Health Organization, *Global Status Report on Noncommunicable Diseases 2010*, Geneva, World Health Organization, 2011

<sup>14</sup> See [www.dh.gov.uk/en/Publicationsandstatistics/Publications/dh\\_103146](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/dh_103146)

<sup>15</sup> Subbarao K and Coury D, 'The supply side: Caregivers and their strengths and weaknesses'. In Subbarao K and Coury D, *Reaching out to African orphans. A framework for public action*, Washington, World Bank, 2004, pp.25-44

<sup>16</sup> A recent meta review identified seven studies that found a positive link between disability and economic poverty and five that did not. See Groce N, et al, 'Poverty and disability – a critical review of the literature in low and middle income countries', *Working Paper Series No. 16*, London, UCL Leonard Cheshire Disability and Inclusive Development Centre, 2011. Cited in Samman E and Rodriguez-Takeuchi L, 'Inequalities relating to health and the life course: disability, mental illness and older age', Paper submitted by the Overseas Development Institute to the Post-2015 Global Thematic Consultation on Addressing Inequalities, 2012

<sup>17</sup> Ibid

<sup>18</sup> See Cain E, 'Voices of the marginalized: Persons with disabilities, older people, people with mental health issues, Paper submitted to to the Post-2015 Global Thematic Consultation on Addressing Inequalities, 2012

<sup>19</sup> World Health Organization, *World Report on Disability*, Geneva, World Health Organization, 2011, p.208

<sup>20</sup> ADD International, 'Practical suggestions for including disability in the post-2015 framework', 2012

<sup>21</sup> Samman E and Rodriguez-Takeuchi L, 'Inequalities relating to health and the life course: disability, mental illness and older age', Paper submitted by the Overseas Development Institute to the Post-2015 Global Thematic Consultation on Addressing Inequalities, 2012, p.18

<sup>22</sup> Knox C and Voelcker I et al, *Building a future for all ages*, Discussion paper, London, HelpAge International 2012

<sup>23</sup> International Trade Union Confederation, 'Social protection in the post-2015 development agenda', 2012