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Building a future for all ages

Creating an age-inclusive post-2015 development agenda

“... as the international community embarks on an effort to articulate the post-2015 development agenda, it is clear that the issue of population ageing should be fully addressed as part of this process.”¹

- Ban Ki-moon, Secretary-General of the United Nations

We invite comments and suggestions on this paper. Please get in touch with Anders Hylander, HelpAge International, ahylander@helpage.org

To participate in discussions on global population ageing and the post-2015 development agenda, visit: www.helpage.org/post-2015

Key messages

By 2030, there will be more people over 60 than children under 10; and 73 per cent of the world’s older population will be living in developing countries.² In order to respond to global population ageing, goals, targets and indicators should respond to all stages of the life course. Age-inclusive goals that are based on explicit human rights standards are needed to promote and improve quality of life for all:

- **Promote both life expectancy and healthy life expectancy** as key measures of human development.
- **Ensure access to income for all ages** through the adoption of a social protection floor and ensuring access to work and livelihood opportunities.
- **Build the resilience of people all ages** through national and community risk management systems.
- **Ensure equitable progress of the post-2015 development agenda** through inclusion of sex and age-disaggregated data in measuring future indicators.

As the current Millennium Development Goals (MDGs) are set to expire in 2015, there is growing recognition that the post-2015 development agenda needs to respond more to shifting global demographics and population ageing. This discussion paper introduces some key issues and sets initial recommendations to achieving a rights-based, age-inclusive post-2015 development agenda.

Why does the post-2015 development agenda need to be age-inclusive?

1. There is growing recognition that the post-2015 development agenda needs to respond to shifting global demographics. In the June 2012 report of the UN System Task Team, *Realizing the future we want for all*, population growth, youth bulges, demographic ageing, migration and urbanisation are rightly acknowledged as global trends that the post-2015 development agenda must respond to. Failure to do so will undermine the fulfilment of its core values of human rights, equality and sustainability. As demographic challenges are uncertain and likely to vary between countries, it is crucial that the post-2015 development agenda enables countries to develop tailored responses to different demographic profiles.

2. Population ageing will continue to be a powerful force of change in this demographic transition. Population ageing is a triumph of human development; people live longer because of improved sanitation, nutrition, healthcare, education, medical advances and general economic wellbeing. Despite this triumph, the UN System Task Team has recognised that the discrimination and exclusion that older people face must be recognised and tackled to decisively address inequalities.³ Even in countries with younger populations, the demographic impacts of migration, urbanisation and HIV are transforming the situations of older people, and are being felt in family structures, health systems, food supply and disaster vulnerability profiles of many countries.

3. The response by governments and the international community has often been weak. Boxes 1-4 shows how old age is inadequately addressed in policy and programmes on health, inequality, food security, and disaster management. A lack of data collection and disaggregation by age conceals exclusion and inequalities in an ageing population and makes it impossible to dismantle entrenched patterns of discrimination.

4. These issues have been reinforced by the absence of a life-course approach in the current MDGs. Despite many successes, the current MDG framework focuses on particular groups – especially children and women of reproductive age – and prioritises indicators accordingly. The MDGs do not therefore, respond to demographic realities, including population ageing, and reinforce the status quo regarding limited data collection.

What needs to be done?

1. To respond to demographic shifts, and more specifically to population ageing, the post-2015 development agenda must take a whole life-course approach. Freedom from fear and want, without discrimination, is essential for a life of dignity at every stage in our lives. An alternative to the current MDG model should not be to build a growing list of goals around “vulnerable groups”. Instead, the post-2015 development agenda needs to be sensitive and responsive to the way that factors such as age, gender and where people live, affect equality, safety and enjoyment of human rights across the life course.

2. This means that the post-2015 development agenda must incorporate goals, targets and indicators that respond to different stages of the life course, including old age. While a new framework may include overarching goals that are not age specific, targets should be designed to cover people of all ages. Equally, indicators must be able to measure how broader goals and targets are achieved for people at different

stages of their lives, including through disaggregation by age and sex. This is essential to ensure that development reaches people of all ages, and that governments can respond, and be held to account, where this is not happening. Specifically, it will also ensure that the impact of population ageing on the achievement of any goals can be measured.

3. Any goals and targets that address the whole population should therefore be measured by age- and sex-disaggregated indicators.

Currently, the lack of nationally-representative and internationally-comparable data on older people is a major barrier to the response to population ageing. Age-sensitive targets should be supported by indicators that encourage important – but realistic – improvements in data collection and disaggregation. Examples include ensuring that key survey instruments such as Demographic Health Surveys cover the whole life course, and considering over-sampling for older age groups to provide statistically significant results.

What measures could be part of the post-2015 development agenda?

1. Integrate measurements on life expectancy at birth as a measure of human development for all ages. Despite being a core component of the UNDP Human Development Index, life expectancy has been absent from the current MDG framework. Life expectancy is influenced by the sum of policies and enjoyment of human rights across the life course, hence can be seen as a barometer for human development as a whole. While it is an aggregated measure, it has some sensitivity to issues of all age groups and would therefore help to drive and monitor human development as a whole.

- **Improve health throughout life to reduce the time people spend in ill health.** Healthy life expectancy from birth is a key indicator of the state of a nation's health. By promoting good health and healthy behaviours at all ages, including older age, disease can be prevented or delayed. While it is important to reduce time spent in ill health throughout the life course, indicators to measure these need to be age- and sex-disaggregated to develop sensitive measures to promote good health.
- **Encourage systematic collection of data on life expectancy and healthy life expectancy at different ages** in all countries.

2. Adopt the approach of a social protection floor to guide countries in extending social protection systems and as a way of measuring progress. Social protection systems that ensure income security across the life course are a key foundation to fulfilment of human rights of all people as they age.⁴ The concept of a social protection floor aligns with explicit universal human rights standards and the values of equity and sustainability, with definition of clear guarantees without prescribing particular policy options. The concept also takes a life-course approach including a guarantee of income security in old age, which makes it age-sensitive.

3. Ensure that people of all ages have equal access to appropriate livelihood opportunities and secure access to livelihood assets. As populations age and healthy life expectancy increases, more active older people may wish to remain in the work force. To take advantage of this ageing dividend, countries must ensure the rights and protection needs of older workers are fully supported.

4. Integrate measuring national and community disaster risk management systems and resilience into the post-2015 development framework, ensuring older people and other vulnerable groups are centrally reflected in this. Resilience and managing disasters through mitigation, preparedness and response is a significant gap in the current MDG framework. The lack of a measurement of progress towards a country's ability to manage disaster risk would raise questions about the sustainability and resilience of any progress measured within the development framework. Climatic risk and disaster vulnerability could increase if growing numbers of older people continue to be left out of planning and emergency response. Therefore, a measurement that is linked directly to the goals of the *Post-2015 Hyogo Framework for Action*⁵ for disaster risk reduction should be included in the post-2015 development agenda, ensuring a joined-up approach.

Box 1: Ageing is at the centre of a shifting disease pattern globally

The World Health Organization projects that by 2020, non-communicable diseases (NCDs) will cause almost three-quarters as many deaths as communicable, maternal, perinatal, and nutritional diseases, and that NCDs will exceed these as the most common causes of death by 2030.⁶ Ageing is one of the four key drivers of NCDs,⁷ accounting for two out of three deaths and about half of all disability worldwide.⁸ While NCDs are on the rise, and increasingly affecting older people in developing countries, the ageing of communicable diseases, such as the HIV epidemic, is exposing growing issues about the interaction of communicable diseases and NCDs.

Given the increasing proportion of people living longer, investment in age-friendly, integrated health services for both communicable and non-communicable diseases is required. Yet health systems in many countries tend to lack adequate services for the prevention, diagnosis and treatment of diseases in older age.

Box 2: Older people are particularly vulnerable in the context of pervasive global poverty and growing inequality

The challenges people face as they age – from ill health to widowhood and discrimination – significantly jeopardise their resilience in contexts of widespread poverty. Those who have been excluded or marginalised all their lives are particularly vulnerable. The cumulative impact of a life-time of gender-based discrimination, violence and unequal development is exacerbated in old age for many women. This commonly leads to greater dependence on families who are already stretched, while older people themselves must continue to work as long as they can, in any way they can. Social protection systems are key to supporting older people and their families, yet they remain weak and fragmented, with only one in five older people globally currently accessing even a basic pension.⁹

Box 3: Many countries are witnessing an increase of the proportion of older small farmers that can have major implications for the stability and sustainability of the world's food supply

In Mozambique, 70 per cent of members of the Small Farmers' Union are over the age of 45,¹⁰ the Ministry of Agriculture in Indonesia estimates that almost 80 per cent of the nation's 140 million farmers are now aged 45 or older,¹¹ and in the Philippines the average age of farmers is 57.¹² Despite this trend, the specific needs as well as strengths of older farmers are not addressed by current agricultural programmes and policy.

The ageing agricultural workforce stems from younger people moving away from agriculture in search for employment opportunities in cities.¹³ This presents a key challenge to securing and intensifying current levels of agricultural production. Older farmers are often unable to wholly access functioning credit markets or development programmes, leading to significant barriers in boosting yields, income, and reducing poverty as a result. A study in Thailand finds that older farmers adopt new technologies or crops as quickly as younger farmers.¹⁴ Therefore, older farmers can and need to be included in ordinary extension, credit, or training programmes in order to increase production and enhance food security. Affordable and feasible labour-saving agricultural technologies (including technologies of practice) must be designed to meet the needs of older people who are labour-constrained or not mobile.

Box 4: More frequent and intense disasters in future decades are set to hit increasingly ageing populations

Despite advances in many countries, disaster management systems responding to the risks and needs of older people continue to be a challenge even in the most progressive systems. For example, two-thirds of the deaths from the 2011 earthquake and tsunami in Japan were over the age of 60. Equally, older people were disproportionately impacted by Hurricane Katrina, as well as older residents living in proximity of the 9/11 attacks; in both instances, authorities acknowledged a failure to include older people in their planning and response.¹⁵ Two consecutive studies by HelpAge International in 2010 and 2011 further suggest that less than 1 per cent of international humanitarian projects address the specific vulnerabilities of older people.¹⁶

This changing demographic picture will gradually become global, reinforcing the need for community, government, and international humanitarian response to address the distinct vulnerabilities of older people. Disaster management responses that are reflective of older people's health, food and nutrition, livelihoods, shelter, and needs in urban and land-use planning are needed to ensure that vulnerability to disasters can be reduced for societies as a whole.

Notes

¹ UNFPA and HelpAge International, *Ageing in the 21st Century: A Celebration and A Challenge*, New York and London, 2012, Preface by the Secretary-General of the United Nations

² 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>

³ UN System Task Team, *Realizing the future we want for all: Report to the Secretary-General*, June 2012, p.25

⁴ Sepúlveda Carmona M, Report of the independent expert on the question of human rights and extreme poverty (A/HRC/14/31), 2010

⁵ See UN International Strategy for Disaster Reduction, *Towards a post-2015 Hyogo Framework for Disaster Risk Reduction*, 2012, http://www.unisdr.org/files/25129_towardsapost2015frameworkfordisaste.pdf

The Hyogo Framework for Action 2005-2015: Building the Resilience of Nations and Communities to Disasters is a ten-year plan for disaster risk reduction that came out of the World Conference in Kobe, Hyogo, Japan, 18-22 January 2005.

⁶ World Health Organization, *Global status report on non-communicable diseases 2010, Description of the global burden of NCDs, their risk factors and determinants*, Geneva, 2011

⁷ United Nations, Note by the Secretary-General transmitting the report by the Director-General of the World Health Organization on the global status of non-communicable diseases, with a particular focus on the development challenges faced by developing countries, UN General Assembly Sixty-fifth Session, 13 September 2010

⁸ Beaglehole R, et al. "UN High-level Meeting on Non-communicable Diseases: addressing four questions", in *The Lancet*, 13 June 2011

⁹ Forteza A, Lucchetti L and Pallares-Miralles M, "Measuring the Coverage Gap", in Holzmann R, Robalino D.A, and Takayama N (eds.), *Closing the coverage gap: The role of social pension and other retirement income transfers*, Washington, World Bank, 2009.

¹⁰ See www.unac.org.mz

¹¹ Reuters, “Ageing farmers threaten Indonesia’s food security”, www.reuters.com/article/2011/06/10/us-indonesia-farmers-idUSTRE7591FD20110610, 2011 (Accessed 11 June 2012)

¹² Pangilinan K, “AIESECers and world-changing leadership”, Official blog site of Senator Kiko Pangilinan, 2011, <http://kilosko.blogspot.co.uk/2011/11/aiesecers-and-world-changing-leadership.html> (Accessed 11 June 2012)

¹³ For example, Barrientos S, Asenso-Okyere K, Asuming-Brempong S, Sarpong D, Akua Anyidoho N, Kaplinsky R and Leavy J, *Mapping sustainable production in Ghanaian cocoa*, London, 2008, http://www.bwpi.manchester.ac.uk/research/ResearchProgrammes/businessfordevelopment/mapping_sustainable_production_in_ghanaian_cocoa.pdf

¹⁴ Bryant J and Gray R, *Rural population ageing and farm structure in Thailand*, Rome, Food and Agriculture Organization, 2005, p. 30

¹⁵ HelpAge International, Conflict and fragility, HelpAge Background Paper, forthcoming.

HelpAge Discussion Papers provide background and understanding on ageing issues in development, to stimulate and inform discussion and consultation.

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