



Bearing the brunt

The impact of COVID-19 on older people in low- and middle-income countries – insights from 2020

Executive summary

HelpAge

International



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HelpAge International is a global network of organisations promoting the right of all older people to lead dignified, healthy and secure lives.

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PO Box 70156, London WC1A 9GB, UK

Tel +44 (0)20 7278 7778

info@helpage.org

www.helpage.org

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Written by Camilla Williamson, Rachel Albone, Georgina Veitch, Florian Juergens, Flavia Galvani, Janet Duffield, Aleksandr Mihnovits, Jemma Stovell, Bridget Sleep and Aidan Timlin / HelpAge International

Edited by Angela Burton

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Contents

4	Executive summary	33	Income security and social protection
7	Introduction	33	Impact of COVID-19 on older people's income security
9	Official data collection on older people during the COVID-19 pandemic	35	Older people's access to social protection during COVID-19
9	COVID-19 cases and mortality data on older people	37	Recommendations
10	National Statistical Offices' approaches to data collection during the pandemic	38	Older people in humanitarian and conflict settings
11	Understanding the social and economic impact of COVID-19 on older people	38	Facing a pandemic in humanitarian and conflict settings
12	Limited accessibility of microdata highlights importance of open data during emergencies	39	Response measures affecting the humanitarian community
12	Making ageing-inclusive data systems part of the recovery	39	Income and food security
13	Recommendations	40	Health and care
14	The impact of COVID-19 on older people	40	Shelter, and water, sanitation, and hygiene
14	Health and care	41	Access to information on COVID-19
14	Older people are at greatest risk	42	Recommendations
16	COVID-19 in long-term care settings	43	Voice, dignity, and rights
19	Knowledge and awareness	43	Discrimination against older people on the basis of age
20	Access to health services and support	44	Denial of older people's equal enjoyment of rights
25	Mental health and psychosocial support	47	Channels for older people's voices to raise their voice and be heard
25	Achieving universal health coverage and strengthening global health security	48	COVID-19 is increasing the marginalisation of some groups
26	Recommendations	49	Recommendations
27	Violence, abuse, and neglect	50	Conclusion
27	Evidence on violence, abuse, and neglect of older people	51	Endnotes
27	Changes in risk factors during the pandemic		
28	Older people most at risk		
28	Older people's help-seeking behaviour		
29	Adequacy, relevance and coverage of violence, abuse, and neglect support services		
32	Recommendations		
3	Bearing the brunt: The impact of COVID-19 on older people – Summary		

Executive summary

In little over a year, COVID-19 has reshaped our world and presented extraordinary challenges to countries globally. By the end of 2020, over 79.2 million cases of COVID-19 had been reported, and total recorded deaths had reached 1.7 million. It is clear that older people are among those most directly at risk of COVID-19-related serious illness and death. But the indirect effects of COVID-19 – and responses to it – also present critical challenges for older people and affect their wellbeing, dignity, and rights. This is especially true for those who have already experienced a lifetime of poverty, exclusion, and inequality.

HelpAge and UNFPA are working to expose the impacts of COVID-19 on older people. As part of a Memorandum of Understanding between the organisations signed in 2020, HelpAge has, with funding from UNFPA, worked to gather evidence on how COVID-19 affects older people. This report presents an overview of emerging insights from research in different settings. The findings and recommendations are intended to inform HelpAge, UNFPA and other actors' efforts to ensure that the response and recovery effort is fully inclusive of older people and that it enables them to meaningfully participate as agents of change in our work to build forward better.



Key findings from our insight reports

Official data

Despite the impact of the pandemic on older people globally, older women and men remain chronically invisible in efforts to monitor the impacts of COVID-19. Older age groups are excluded from COVID-19 official data systems or are not visible within them. Even where data on older age groups is collected, disaggregated data is often not reported or made publicly available. Meanwhile, broader attempts to understand the ways in which the pandemic is affecting older age groups (including by collecting evidence on older people's own experiences during COVID-19) are limited and fragmented. These gaps threaten the extent to which older people's needs and rights are addressed in response and recovery efforts and prevent older people, and those working with them, from holding power holders to account.

Health and care

Older people are the age group most at risk of serious illness and death from COVID-19, but the broader impacts of the pandemic and responses to it on the health and wellbeing of older women and men are also severe and will likely go far beyond the immediate effects of the virus. Older people's pre-existing challenges in accessing health and care services and support, disruptions to health provision and reduced demand from older people due to fear, anxiety and restrictions on their movement, will likely have long lasting impacts that must be addressed. Older people in need of long-term care and support, particularly those living in residential care facilities, also appear to be more at risk. Data from these settings is limited, but in contexts where residential care is more common and where some data is available, the challenges appear to be acute, with high rates of infection and deaths among residents and staff. The pandemic highlights once again, the importance of health system strengthening and achieving age-inclusive Universal Health Coverage (UHC).

Older people face high levels of fear, anxiety, and depression during COVID-19. Concerns have been raised worldwide about the potential mental health impact of the pandemic. HelpAge's assessments and other studies point to a particular concern for older people for whom social isolation poses significant challenges and anxiety associated with COVID-19 have been acute.

Violence, abuse, and neglect

The report draws attention to experiences of Violence, Abuse, and Neglect (VAN) among older people, how the risks of older people experiencing VAN have been exacerbated during the pandemic, and how significant gaps in the collection and analysis of data hamper more effective prevention and response. Without data we cannot hope to understand the prevalence, risk factors, types, and consequences of VAN that older people

experience in a differentiated way from other age groups and challenge the assumption that older people do not experience VAN. This is essential for designing and implementing effective response mechanisms to the current crisis and for preparing for future challenges.

Income security and social protection

The income, livelihoods and poverty of all age groups have been severely impacted by COVID-19, but the multiple risk factors and disadvantages people accumulate over the life course mean some groups of older people will face heightened challenges in recovering from the pandemic. The risk of the virus to older people, the barriers older people experience finding employment, livelihood risks, and higher existing level of poverty among some groups in later life, highlight the critical importance of ensuring that older people's needs and rights are addressed in recovery efforts – including through the adoption of universal pension coverage where this does not exist and the inclusion of older people in income and employment generating programmes. The learning from the pandemic is clear: universal social protection can protect older people during COVID-19 and help to safeguard them from the risks of future crises.

Older people in humanitarian and conflict settings

Even before the COVID-19 pandemic, the humanitarian system was failing to support older people according to the standards it set itself, and the pandemic has placed highly vulnerable communities at even greater risk. The death rates among older people in these settings are even higher than in other contexts and the indirect impacts are equally severe. The report highlights the urgent need to address the risks older people in humanitarian crises face and their ongoing exclusion in humanitarian responses at local and global levels.

Voice, dignity, and rights

Public health responses to the pandemic have discriminated against older persons, denied their rights, and limited their ability to exercise their voice. A human rights perspective was missing at the outset of the pandemic when the emphasis was on dealing with a life-threatening health emergency. This has shifted over time with recognition from different quarters on the need to act in accordance with international human rights standards and principles. However, there were and continue to be significant challenges in older people being recognised as rights holders.

Conclusion and overall recommendations

COVID-19 has starkly exposed the inadequacy of systems at local, national, and international level to meet the needs and uphold the rights of older people, and to effectively promote their resilience and support them during crises. The pandemic has shone a light on the quality, coverage, adequacy, and flexibility of systems and highlighted their failures in many places. It has also exposed and exacerbated deep rooted ageism in our societies. Our consultations with older people and the HelpAge Network during 2020 draw attention to the critical need for public health emergency response and recovery measures that respect the rights, voice and dignity of older people.

COVID-19 is a clarion call. We need radical change if people of all ages are to be able to contribute to and share in the gains of recovery, ensuring no one is left behind. The pandemic illustrates the importance of financing and implementing the Sustainable Development Goals to build resilient and equitable systems and societies for everyone, including older people. This is essential to ensuring we all recover successfully from COVID-19, build forward better, and are prepared for the future in an ageing world.



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Governments, international partners, and other actors must:

- **Focus on data systems** at local, regional, and international levels, to ensure they are ageing-inclusive. Each stakeholder must independently assess its ability to successfully produce vital information on older people during the pandemic, and jointly – with other stakeholders – commit to improving the conceptualisation, collection, analysis, reporting, and public dissemination of timely data, disaggregated by age, sex and disability.
- **Conduct research and data analysis** to understand the short- and long-term health impacts of COVID-19 for older people, and to provide an evidence base to inform efforts towards health systems strengthening and the achievement of truly age-inclusive UHC.
- **Collect, analyse and use data on violence, abuse, and neglect of older people** to inform prevention and response measures. An agreed and comprehensive framework and guidance on data collection on VAN of older people should be developed to ensure cross comparable and high-quality data.
- **Use the momentum generated by COVID-19 to invest in and achieve universal social protection**, including universal pension coverage and the inclusion of older women and men in income and employment generating efforts, as a crucial mechanism to mitigate the impacts of the crisis on people's wellbeing and poverty, and to enable an inclusive and speedy economic recovery.
- **Provide leadership and proactively recognise and respond to the rights and needs of older people in emergencies.** Humanitarian actors and governments should use globally accepted Humanitarian Inclusion Standards to design response efforts that are inclusive of older people, including those with a disability.¹
- **Call for and adopt a UN convention on the rights of older persons** which would provide a definitive, universal position that age discrimination is morally and legally unacceptable, clarify how human rights apply in older age and guide governments on how to meet their responsibilities to uphold those rights.

1. <https://spherestandards.org/coronavirus/>



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info@helpage.org
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