

**HelpAge  
International**

*age helps*

## **Annual report and financial statements**

31 March 2012



**Join us**

***make it ageless***



Hilton Humanitarian Prize  
2012 recipient

## **Our vision and mission**

**Our vision is a world in which all older people fulfil their potential to lead dignified, active, healthy and secure lives.**

**We work with our partners to ensure that people everywhere understand how much older people contribute to society and that they must enjoy their right to healthcare, social services and economic and physical security.**

## **Contents**

<b>The year in review</b>	<b>3</b>
<b>Report of the trustees</b>	<b>5</b>
<b>Our achievements in 2011-2012</b>	<b>5</b>
Global action 1: Enabling older women and men to have a secure income	5
Global action 2: Enabling older women and men and those they support to receive quality health, HIV and care services	11
Global action 3: Enabling older women and men to actively participate in, and be better supported during, emergency and recovery situations	16
Global action 4: Building global and local movements that enable older people to challenge discrimination and claim their rights	22
Global action 5: Supporting a growing global network of organisations to improve their work with and for older women and men	27
<b>Financial review</b>	<b>32</b>
<b>Structure, governance and management</b>	<b>33</b>
<b>Statement of the responsibilities of the trustees</b>	<b>35</b>
<b>Independent auditor's report</b>	<b>36</b>
<b>Balance sheet</b>	<b>39</b>
<b>Cashflow statement</b>	<b>40</b>
<b>Notes to the financial statements</b>	<b>41</b>
<b>Legal and administrative details</b>	<b>51</b>
<b>Our Affiliates</b>	<b>52</b>
<b>Our regional offices</b>	<b>53</b>

Cover photo: © Joanne Hill/ HelpAge International. Emma, 67, from Colombia, pictured with her two grandsons, is the main breadwinner in her family and earns a living thanks to small business support from HelpAge partner, Cooperativa Coomostaza.

## The year in review

*Luz Barreto, member of the HelpAge Board, cornerstone of the Peruvian HelpAge network, tireless worker, advocate and lobbyist for the rights of children, women and older people, passed away on 13 October 2011 leaving a huge vacuum in our work, our lives and our hearts. She is greatly missed.*

We are pleased to report another year of strong performance and building of the reputation of the HelpAge global network. Together with our Affiliates and other partners we are continuing to help millions of older people and their families both practically and in gaining greater recognition of their contributions and role in society. We are especially proud to have been the 18th winner of the Conrad N. Hilton Foundation Humanitarian Prize in 2012. This is an important recognition of the contribution of the HelpAge global network and affirms the importance and strength of our work.

With our 98 Affiliates, we have been active in seeing older people's health needs included at the United Nations Summit on Non-communicable Diseases – with some successful outcomes, and to ensure that older people participated in a grassroots review of governments' implementation of the promises they made in the 2002 Madrid International Plan of Action on Ageing. In partnership with the United Nations Population Fund and working with 10 other United Nations agencies, we will be reporting on our findings in 2012 and continuing to call for UN recognition of the rights of older people through the UN Open-ended Working Group on Ageing. This working group has already acknowledged that there is more to be done by governments.

### Delivering services

We have seen growth in real terms in our development programmes and are continuing to build our work in fragile contexts and countries susceptible to humanitarian crises. During the last two years, we have worked with a total of 4,100 older people's groups – working actively with almost 3,000 groups this year, including 1,200 new groups. The membership of the groups with which we worked with actively is over 320,000 older people. This year, 850,000 people benefited directly from our work across almost 40 countries, with 1.4 million service instances delivered in our community-based work. Over 65 per cent of the people we work with are older women.

These services helped older people to improve their health and wellbeing, increase their income, care for their dependants, access existing entitlements and recover from emergencies. At least 40 per cent of the people we reached live in countries experiencing long-term difficulties, including Colombia, DR Congo, Ethiopia, Myanmar and Sudan. We have been able to grow our work to help older people's livelihoods be more resilient to climate change, natural disasters and other hazards. We also focused on the delivery of services, healthy ageing and prevention and management of non-communicable diseases. Both of these are key areas we are seeking to grow in the coming years.

We trained 8,500 government and other agency staff in social protection, health and care for older people. A further 13,000 people, including older people, were trained as health workers, home-based carers, HIV educators, paralegal advisers or disaster preparedness activists in their communities.

The drought crisis in East Africa was a major focus of our emergency work this year. In Ethiopia and Kenya, we designed and implemented some innovative programmes. We responded to other emergencies in 16 countries. In total, we provided 340,000 services to 250,000 older people, family and community members to cope with crises. Age UK continues to provide essential support for our emergencies work with £3.1 million raised. Our new global emergencies fund – also supported by Age UK – was used in seven countries to respond rapidly to new crises. Our emergency strategic partnerships and influencing work increased significantly, with our active engagements with humanitarian actors at headquarters and field levels growing from six to 14 this year.

### Making change last

Millions more are benefiting as we work to change the attitudes of governments and other agencies towards ageing and older people. The impact of our global Age Demands Action campaign – now active in 59 countries – was evaluated, recognising its contribution to helping almost two million more older people benefit from new national or local policies or changes in practice this year. We have also

seen a significant change in access to social pensions, with 2.5 million more older people getting social pensions worth £550 million per year.

Our influence on the humanitarian stage is also increasing. Our first report on humanitarian financing last year was followed by a report with Handicap International this year. It highlighted the lack of dedicated attention and funding for older people in crisis, and we have evidence of both donor governments and the UN re-thinking their policies on older people and other vulnerable groups.

### Fitter for purpose

We are responding to the increasing demand for charities and non-government organisations to be more transparent and to demonstrate their effectiveness. Implementation of our new accountability framework is underway, more of our evaluations are on our website and we are working to comply with the International Accountability and Transparency Initiative. This means that more information on our projects income and spending will be on our website this year.

We have made significant progress in documenting and reviewing our programmes. We have used the process to improve and innovate more and to develop clearer theories of change, particularly in social protection, HIV and AIDS, livelihoods and resilience, and emergencies and emergency preparedness. Such investments are already improving the quality of our work.

The value of a clear strategy in our communications work has been proven with the Age Demands Action campaign reaching 50 million people this year. We developed a clear advocacy agenda and calendar for the network in 2012 to grow impact through coordinated action at global, regional and national level on health, rights and the post-2015 development agenda. There is also a strong focus on the issues affecting older women, using the UN days on women, widows and elder abuse to raise awareness of the violations of their rights.

We have continued to differentiate the way we work in middle- and low-income countries. In middle-income countries we are increasingly focusing on supporting our network of Affiliates and partners to play a more significant role in influencing policy and practice, alongside building their fundraising capacities.

In a difficult funding environment, our grant income from donors was lower this year, but we have been able to increase our overall income to £26.7 million from £25.9 million last year, due to the support of additional unrestricted funding from Age UK, the UK Government and the Hilton Prize. We will be continuing to work with Affiliates in Europe, the USA and East Asia to build and diversify our funding base and are already working with the new Age UK entity, HelpAge International UK, to identify new funding opportunities and on wider collaboration on public and political awareness in the UK. We are also entering next year with a new global strategic funding arrangement with the Swedish International Development Agency.

We would like once again to thank our dedicated and experienced staff, Affiliates, partners and the older women and men we work with for making possible the achievements of this year.



Tilak de Zoysa  
Chair



Richard Blewitt  
Chief Executive Officer

## Report of the trustees

The trustees present their report and the audited financial statements for the year ended 31 March 2012.

### Our achievements in 2011-2012

#### Global action 1: Enabling older women and men to have a secure income

**Our vision** is for all older people to have a secure income.

**The reality** is that the lack of a secure income is one of the biggest problems facing older people. Half the world's older people do not have a secure income, and fewer than one in five people over 60 receive a pension. The majority of the world's older people live in developing countries and have little accumulated savings to help them in their older age. They have to work well into their older age, often in insecure, low-paid jobs.

Unless action is taken to improve the situation, we estimate that by 2050, more than 1.2 billion older people will lack a secure income.

##### What are our aims?

We think the best way of achieving income security in older age is for governments to provide universal, social (non-contributory) pensions and to provide support in helping older people remain economically active.

##### How are we doing this?

**Making the case for income security in older age** to governments, donors, regional bodies and the UN, with a special focus on social pensions.

**Providing technical training and support to governments** to improve existing social pensions.

**Helping civil society and older people** to lobby for new or improved pensions and cash transfers and monitor the delivery of existing ones at national and international levels.

**Building and sharing evidence** on the design, implementation and impact of social pensions.

**Providing practical support** to older people to access existing cash transfers.

**Improving older people's incomes** by providing income-generating and rural development activities, vocational and business training and working with them to mitigate the impact of a changing environment.

**Developing models of resilience** to shocks, climate change and natural disasters.

##### In 2011-2012, we planned to focus on:

- Generating further social pension or benefit commitments for older people by providing technical assistance and training to government staff and through our advocacy.
- Delivering direct programme work to improve the incomes of older people, their families and dependants, and growing our programmes to protect livelihoods from shocks and enhance climate change adaptation.
- Strengthening our approaches to livelihood programming to be better able to lobby governments and micro-finance institutions for older people's improved access to micro-credit, informal sector labour rights, land and asset rights and the inclusion of older people in cash for work programmes.

##### Highlights

**2.5 million more older people getting their pensions.**

**A new social pension promised for older people in Tanzania.**

**The governments of Cambodia, Kenya, Mozambique, Indonesia, Jamaica and Zambia have started to design new or larger social pension or benefits schemes.**

**1,000 more older people's associations learning to improve or protect their livelihoods.**

**Measuring our progress**

Original Strategy to 2015 indicator	Output and outcome indicators	Baseline at March 2011 <sup>1</sup>	Predicted by March 2012 <sup>2</sup>	Actual by March 2012 <sup>3</sup>	Changes for 2011-2012
<b>We will enable older men and women to access a secure income</b>					
<b>20 per cent more older men and women in 30 low- and middle-income countries are receiving state non-contributory pensions or benefits</b>	Number of countries where HelpAge provides technical assistance to governments on social protection	17 countries	20 countries	21 countries	Four new country engagements: Indonesia, Moldova, Tajikistan and Zambia.
	Coverage and value of new or improved social protection schemes (benefits/pensions)	Zero – we are measuring new only	£182 million per annum to 1.8 million people <sup>4</sup>	£596 million per annum to 2.5 million people	Six countries reported significant change this year: Ecuador, Mozambique, Nepal, Peru, Thailand and Vietnam.
<b>Households containing older men and women experience sustained improvements in their income and food security in 25 countries</b>	Number of older people’s associations (OPAs) involved in income-generating work	2,950 OPAs including 68,000 members	3,750 OPAs including 115,000 members	3,950 OPAs including 90,000 members	1,000 new OPAs established including 22,250 members. Significant growth reported in India, Myanmar and Tanzania, but overall funding has not been as high as we hoped.
	Number of older people working to reduce shocks (disaster risk reduction, seasonal poverty, drought and so on)	88,000 older people	114,000 older people	122,000 older people	34,000 more older people being trained or assisted to reduce shocks and protect themselves. Steady growth across 12 countries, with major programming in Bangladesh, Bolivia, the Philippines and Myanmar.
	Number of older people getting new access to financial services	36,000 older people	56,000 older people	52,000 older people	16,000 more older people being supported, predominantly through community revolving loan funds. Significant growth in six countries – Bangladesh, China, India, Myanmar, Tanzania and Vietnam, but growth has been slower than anticipated mostly due to funding.

<sup>1</sup> During 2011, a major review of our corporate indicators was undertaken, and in some instances, our definitions revised. The “Measuring our progress” tables in this report will reflect this review.

<sup>2</sup> Our predictions to March 2012 were revised in December 2011 as part of our corporate indicator review and annual planning process for 2012-2013.

<sup>3</sup> These actual figures are cumulative and represent the number of people or activity since the start of our Strategy to 2015. Actual numbers each year may be lower.

<sup>4</sup> Coverage of pension schemes: in our revised figures, we have chosen to exclude data from China which due to very high numbers creates a distortional effect.

## What did we achieve?

### Better pensions and benefits

This year, a further 2.5 million older people gained entitlements to pensions in at least 10 countries, with a value of over £550 million a year, excluding a very significant change in China. Many of these changes are attributable to our work on providing technical assistance and training to governments, our work with older citizen monitoring of existing schemes, and through our campaigning and support to civil society across 27 countries. Our work is continuing to influence governments, UN and some donors to address the issues of ageing and social security. Key policy change and influencing achievements include:

**The Government of Tanzania** Declared to parliament that a universal social pension bill will be presented in the next financial year 2012-2013. We have been asked to help with a study to establish the best way to achieve its delivery.

**The Government of Kenya** Doubled its budget for its Older People's Cash Transfer programme from £3.5 to £7 million a year. This is partly attributable to our support to the Ministry of Finance on designing and implementing an operations manual required to demonstrate effective administrative arrangements.

**The Government of Mozambique** Announced a 30 per cent increase in its budget for social protection and its intention to revise its existing food subsidy scheme (PSA) for vulnerable groups to merge this into a new basic social security programme (PSSB). The initial coverage of the scheme is limited, but will expand nationally over time.

**The Government of Thailand** Approved a new policy which provides further increases to its new social pension. The changes include moving from fixed value for all people over 60 years, to a progressive benefit dependent on age. This change will benefit about 80 per cent of the older population, over 6.5 million older people.

**The Government of Kyrgyzstan** Enacted a new national strategy on social protection for 2012-2014. It is the first document that reflects a comprehensive government vision for a future social protection system. The strategy clearly places older people as among the vulnerable groups that must be protected.

**The Government of Ecuador** Increased the number of older people receiving the Human Development Benefit. In addition to 271,000 older people receiving the basic pension, 500,000 older people are now entitled to receive an additional support pension.

**The Government of Cambodia** Issued a sub-decree on the formation of an inter-ministerial national committee to work on policies and package options for older age.

### Technical support to governments

We provided technical assistance and training to government ministries responsible for implementing social protection and poverty reduction schemes in 21 countries, with new engagements in Indonesia, Moldova, Tajikistan and Zambia. This is in addition to running our global social transfer course in Thailand for a fourth year for participants from 15 countries. Some examples of the forms of the assistance provided include:

**Central Asia** Our research into informal labour markets and migration in Kyrgyzstan and Tajikistan, and our mapping of the social protection systems in these countries led to the European Union (EU) inviting us to participate in the EU-led donor working group on social protection, and to a secondment agreement with the Ministry of Social Protection in Kyrgyzstan to support the national social protection strategy.

**Ethiopia** We are supporting the development of a new social protection policy which now includes a social pension as one of the instruments. We have also supported a new pilot social cash transfer programme in Tigray, where 70 per cent of the pilot beneficiaries are older people, to build evidence and learning to strengthen the case for social protection with the government.

**Kenya** We supported the Ministry of Gender, Children and Social Development by: providing training to district officers and key stakeholders based on an operations manual developed by HelpAge for the

Older People's Cash Transfer programme, and by updating the feasibility study on expanding the scheme to a universal programme.

**Indonesia** The Government of Indonesia has contracted the Demographic Institute of the University of Indonesia and HelpAge to undertake research into poverty and social assistance in older age. The purpose of the research is to inform government thinking on potential social assistance programmes.

**Paraguay** Our partner, Centro de Educación, Capacitación y Tecnología Campesina, together with the Unit of Social Economy of the Finance Ministry, trained 11 municipal authorities on the Basic Paraguayan Pension and its implementation regulations. This enabled local governments to ensure correct implementation of procedures for identifying and registering pension recipients.

**Zambia** At the request of the International Labour Organization (ILO) and United Nations Children's Fund (UNICEF), we worked with our Affiliate, Senior Citizens' Association of Zambia, to support the Ministry of Labour, Youth and Sport in Zambia. We developed and ran a stakeholder consultation process that helped to build awareness of social pensions among key stakeholders. It was supplemented by the delivery of a training course on Ageing and Social Protection for the Ministry.

### Supporting civil society networks

We assisted networks of civil society partners and older people's associations (OPAs) to support work with governments on better pensions and benefits in 25 countries this year. Some examples of these actions include:

**Colombia** Five of our partners from the capital and the north of the country coordinated a campaign, which resulted in a delegation of older people in Bogotá presenting a concrete proposal to the government for a social pension for older people with no other form of pension income. As a result, our partners were invited to join a government forum to guide the process of turning the national policy on ageing into practical programmes with a matching budget.

**Jamaica** Working with partners and other civil society organisations, "stakeholder forums" were held with these organisations, older people and government officials. Advocacy focused on introducing a social pension and making it easier for older people to benefit from the current social cash transfer programme, PATH. More older people are now receiving PATH grants and there is evidence that the Ministry of Labour and Social Security will undertake a feasibility study on a social pension.

**Tanzania** We worked with our partners and older people to increase pressure on parliamentarians and ministries to act on their commitments to a social pension. This included meetings between older people and members of parliament and with the chairperson of the Parliamentary Committee in Community Development. These actions resulted in parliamentary questions to the government and to a commitment from government to present a universal pension bill in 2012-2013. We are working to see this commitment realised.

### Improving older people's incomes

We ran income-generating activities for older people in 25 countries this year, commencing new work with 1,000 more OPAs. This brings the total number of OPAs we have worked with during the last two years to almost 4,000. We actively supported a similar number of groups this year – almost 3,000 groups. However, we were not able to raise all the funding we hoped for, so the number of older people in these groups was lower than expected. The work we undertake varies, but typically centres on the establishment of OPAs (often small groups of about 20 older people) and supporting them to manage savings and/or revolving loan schemes to supplement other sources of income. Training forms an essential part of our work, whether in technical or vocational skills or business literacy and management.

This year, 190,000 older people received a range of services to support or protect their incomes and livelihoods – double the previous year. Within this number, about 65,000 people took part in activities or training to help build their resilience to droughts, floods or other hazards – about five times the level of activity we undertook last year. New programmes to build resilience and disaster preparedness started in Bangladesh, Ethiopia, Jamaica, Kenya, Myanmar and the Philippines. There was continuing work in programmes that promote greater resilience for older people's livelihoods, such as creating secure water sources and agriculture and animal husbandry training, in Cambodia, China, Bolivia,



Kyrgyzstan and Mozambique. Growth in work on building resilience and protecting livelihoods is important to ensure our work will have longer-term effectiveness. Some examples include:

**Bolivia** We helped 250 older people in rural areas affected by cyclical flood and drought by providing farming supplies and training to build micro-irrigation systems, raised beds and ponds (based on older people's ancestral knowledge). We trained 800 older farmers on the efficient use of natural resources, water and organic farming.

**Kyrgyzstan** We supported over 750 older people in 20 communities to be protected against severe winter conditions and the risks of civil unrest. Older people and community members were trained in risk assessment and reduction. We continued to provide technical interventions against severe winters, including installing greenhouses, insulating homes and providing solar panels to community centres, to help protect incomes and reduce fuel costs and the impact of price shocks.

**Myanmar** Following the devastation caused by cyclones in recent years, we are working in a consortium with a risk-reduction programme to build infrastructure and livelihoods that are better prepared for future disasters. Based on the development of 115 older people's self-help groups and village development committees – approximately 10,000 older people and community members – we supported community-based health programmes and the provision of equipment for farming, fishing and livestock alongside technical training in improved and more resilient techniques.

### Influencing regional and international bodies and donors

We built our relationships with key international and regional actors around the world, to ensure that older people become an integral part of key policy debates and development. We provided submissions and support for organisations, including the UK Department for International Development, the European Commission, the International Labour Conference and the ILO, the UN Commission for Social Development, the World Economic Forum, the World Bank, the UN Social Protection Floor Initiative led by UNICEF and the World Health Organization, and the International Social Security Association. At a regional level, we worked with the Association of Southeast Asian Nations Secretariat, the Asian Development Bank, the Inter-American Development Bank and the offices of the ILO in most regions. We also expanded our PensionWatch website which attracts interest and contributions from development professionals, academics and others. Some work of particular note includes:

**International experts meeting on income security** Our growing reputation in this field helped us bring together experts on the issues of ageing, social security, pensions and livelihoods from over 30 organisations. The meeting mapped out pathways to achieve income security in older age through increasing pension coverage and developing age-inclusive employment policies and programmes. Critical relationships were developed or deepened with the World Bank, International Trade Union Congress and Organisation for Economic Co-operation and Development donors, as well as key academics. The meeting resulted in a request by the World Bank pension team to collaborate on a future publication.

**Donor social protection strategies** We provided submissions to the new strategies of the World Bank, UNICEF and the European Commission. The World Bank and UNICEF social protection strategies both now have substantive content on ageing.

### Research, learning and building the quality of our work

We invested and established collaborations in two key areas of strategic importance for our work in securing livelihoods for older people.

**Livelihoods framework and field workers guide to livelihoods in older age** A review of our programming with partners and Affiliates and of external literature and practice, resulted in the development of a new conceptual framework and programme design tool. The purpose is to improve analysis and understanding of the factors that contribute to livelihoods, thereby improving both policy advocacy and programming in livelihoods. The framework is currently a “working tool”, which will be tested and finalised through field pilots during 2012-2013 in three different countries.

**Older people and resilience** Our work is exploring the use of older people's knowledge of their local environments and traditional early warning indicators, combined with learning from modern science. We are investigating at-risk traditional agricultural practices which could be beneficial and resilient if

re-employed in modern contexts. This work is being undertaken in partnership with University College of London Hazard Centre, the Climate Centre at Sussex University, Christian Aid, CAFOD and Plan International.

**Our plans for 2012-2013:**

Next year we will work to see that governments commit at least an additional £350 million to social pensions and statutory benefits for four million older people. We will invest further effort in developing social protection schemes in fragile contexts. We shall explore opportunities to replicate our work in accountability mechanisms in social cash transfer programmes, building on our experience in Kenya and Mozambique, and continue to expand our evidence on the positive impact of social pensions.

We aim to increase our work to improve older people's livelihoods and build their resilience using the new models developed this year. We will work to build larger-scale programmes with higher coverage and impact through direct delivery and ensuring older people are reached in existing agricultural and micro-finance programmes of governments or other agencies.

We will conduct action research work in three countries to develop our work in building community-led advocacy on access to micro-credit, micro-finance and agricultural services. A particular focus across these areas of work will be on securing the livelihoods of older farmers in fragile contexts and countries susceptible to frequent natural disasters.

## Global action 2: Enabling older women and men and those they support to receive quality health, HIV and care services

**Our vision** is for older people to receive good quality health and care services, and to be included in the response to HIV and AIDS, whether they are at risk of infection, living with HIV or in their role as carers.

**The reality** is that older people in developing countries still have limited access to age-appropriate health, HIV and care services. Governments still fail to invest in training geriatric and specialist health workers or in the infrastructure that could benefit older people's health and care. Few governments are responding to the needs of an ageing population, and most fail to build services to prevent and treat chronic, non-communicable diseases (NCDs) such as heart disease, stroke, diabetes, Alzheimer's disease and other dementias.

This investment is made all the more important by the increasing responsibility for care taken on by older people. For example, older people care for spouses or other family members who are sick, or for grandchildren whose parents have migrated for work, or who are ill or have died, or absent because of conflict, AIDS or other illnesses.

### What are our aims?

We want to convince policy-makers to include older people explicitly in key policies, strategies, commitments and programmes that respond to health, care and HIV and AIDS, and to persuade them that population ageing has pressing implications for health systems, the delivery of healthcare and its financing.

### How are we doing this?

**Delivering health, HIV and care services** to older people and those in their care.

**Training health, HIV and care service providers** to deliver better services for older people.

**Lobbying for change in government policy and practice** to recognise and finance responses to older people's health, HIV and care issues and provide them with practical support.

**Raising the awareness of international and regional policy-makers** on older people's issues.

### In 2011-2012, we planned to focus on:

- Establishing NCDs as a key priority in the international and national health and humanitarian policy arenas.
- Building our direct support for older people in developing countries to improve the prevention, management and early diagnosis of chronic illnesses.
- Delivering direct programming to improve access to age-friendly health and care services for older people, including work on self-care and care giving and receiving by older people, their families and communities.
- Reviewing and strengthening our approaches and models of intervention in health and care and building our published work.
- Ensuring the inclusion of older people in new approaches to health financing.

### Highlights

210,000 more older people received health, HIV or care services across 30 countries.

1,200 health staff trained to provide better health care for older people.

8,000 people trained as community health workers, homecare volunteers and HIV educators and counsellors.

In total 600,000 different services were delivered – a 50 per cent increase over last year.

Three East Asian governments have adopted national homecare programmes – five more are close.

The Government of Vietnam has made healthcare cheaper for 600,000 more older people.

The UN recognised ageing and mental health issues as part of its agenda for non-communicable diseases.

**Measuring our progress**

Original Strategy to 2015 indicator	Output and outcome indicators	Baseline at March 2011	Predicted by March 2012	Actual by March 2012	Changes for 2011-2012
<b>We will enable older men and women and those they support to access quality health, HIV and AIDS and care services</b>					
<b>Older men and women in 15 countries can prevent and manage chronic illness</b>	Number of countries providing new geriatric/NCD training for health professionals	7 countries	13 countries	11 countries	Four countries initiated new work in training government health staff or getting governments to commit to building their health training programmes – Cambodia, DR Congo, Haiti and Tanzania. New programming in Bangladesh and Kenya is still to commence.
<b>Older men and women in 20 countries receive guaranteed free access to age-friendly health services</b>	Number of older people reporting increased access to health services	229,000 older people	400,000 older people	409,000 older people	180,000 more older people receiving direct services or gaining better access to government services. Growth reported across 13 countries, with significant growth in Tanzania.
<b>Older men and women in 12 countries receive appropriate HIV and AIDS services</b>	Number of governments increasing access to antiretroviral treatment or support services for older people and family members living with HIV	5 countries	6 countries	5 countries	No reported change this year, but the outcome of a revised regional policy awaited for the East African Community which would impact on policies in Kenya, Uganda and Tanzania.
<b>Older men and women receive a range of appropriate primary healthcare services in 25 countries</b>	Total number of older people receiving improved access to community-based care	25,000 older people	53,000 older people	54,000 older people	29,000 more older people now receiving home or community based care in 10 countries. Significant growth in Haiti, the Philippines and Myanmar.
	Number of older people reporting improved health status (through improved access, service delivery, self-care, improved income, etc.)	142,000 older people	248,000 older people	186,000 older people	44,000 more older people self-reporting improved health status. We believe the number to be higher, but are still to implement a robust standard methodology to measure health outcomes to assist credible results to be declared.

## What did we achieve?

### Helping older people access health, HIV and care services

Our work provided health, HIV or care services to about 350,000 older people this year in over 30 countries, with 210,000 older people receiving our help for the first time. We are also seeing a growth in focus on prevention, management and treatment of chronic diseases and NCDs. We also trained 1,200 government and local agency health staff in older people's health and over 8,000 community health workers, homecare volunteers and HIV educators and counsellors. In total, 600,000 different services were delivered – a 50 per cent increase over last year. Some examples of the direct services we provided this year:

#### Healthcare

- We enabled 70,000 older people to access basic primary healthcare – receiving health check-ups from doctors and nurses using mobile health services, getting help with transport to hospitals or clinics or to pay for the medicines they need. Screening and provision of medicines for NCDs is a key part of this work.
- We helped over 25,000 older people register for free or subsidised health services by working with government officials and health staff at community level.
- We provided for the costs of eyecare for 55,000 older people, including 11,000 cataract or other surgeries. An additional 40,000 people were supported with screening, treatment and surgery in our emergency programmes in Darfur and Pakistan.
- Healthy ageing activities – such as exercise classes and preventative health education – involved over 50,000 older people, primarily in East Asia, but with new activities in Latin American countries and the occupied Palestinian territories.
- Help to manage specific chronic illnesses, through physiotherapy services and treatment programmes for conditions such as diabetes, was provided to over 20,000 older people.

#### HIV and AIDS

- We trained 2,100 community HIV educators, traditional health workers and home-based carers in Africa to provide support to older people and community members affected by HIV. Over 50,000 older people, their families and community members received HIV education and other support.
- 2,000 older people were supported to access voluntary testing and counselling services and subsequently receive antiretroviral treatment.

#### Social care and wellbeing

- We helped 14,500 older people receive regular homecare by training home-based carers and working with government providers.
- We provided opportunities for about 100,000 older people to take part in regular social or recreational activities.
- We supported 12,000 older people in other forms of community care, including community outreach work or “age-friendly spaces” to link older people suffering from mental health conditions, stress or trauma to professional services, or supporting befriending activities where family members or neighbours are trained to provide basic levels of psychosocial care.
- We helped 10,500 older people with basic, but essential needs at home – new clothes or household goods and repairs to or rebuilding homes.
- We helped 34,000 older people access a safe drinking water supply and 3,500 older people to have a latrine.

### Improving services for older people

#### Better access to services

**Tanzania** Through our work on service monitoring and accountability, we are promoting either free or subsidised services for older people and better quality of the services provided. By the end of this year, 57 district hospitals (almost full coverage) will have dedicated rooms and medical staff to deliver quality and free medical services for older people. This year, our partners recorded 232,000 older people who have accessed these services – an increase of 132,000.

**Mozambique** We are helping older people to access HIV and health treatments in two ways. First, we trained 170 older men and women as peer educators, reaching 1,400 older people this year. Peer education provides HIV prevention education and encourages the uptake of counselling and testing services: 101 older people visited the local counselling services and 54 were found to be HIV-positive and are being helped to access antiretroviral treatment. Second, we worked with our partners and the Ministry of Health to establish mutual support groups and services for people living with HIV in 16 communities, to help reduce the cost of transport for treatment access: 216 older people are now accessing antiretroviral treatment.

**Myanmar** We provided monthly medical treatment to 6,260 older people through mobile clinics. The most common ailments were high blood pressure, diabetes, joint pains and seasonal diseases and we provided medicines and homecare support for house-bound older people. The programme also provided mobility aids, cataract surgery and hearing aids.

### **Providing community care**

**China** We worked in Shaanxi and Sichuan provinces to establish a system of volunteer-based care in 38 villages that reaches 600 older people. In earthquake-affected villages in Sichuan, we offered dedicated psychosocial support for older people affected by stress due to family problems, health issues and loneliness or by the impact of the earthquake. A specialist provided initial support and we trained families and neighbours in basic stress management and practical support for older people.

**Philippines** Our Affiliate, Coalition of Services of the Elderly, focused on training community service providers in its post-disaster programmes. Community gerontologists, homecare volunteers and masseurs have been trained and are now providing practical support, care and access to health check-ups for an estimated 13,000 older people.

**Occupied Palestinian territories** We worked in the Shatee displaced people's camp in Gaza, providing an integrated community care programme. This work supported over 600 housebound older people through regular home visits, physiotherapy sessions, counselling sessions and recreation outings. Our work also focused on providing mobility and other aids – walking sticks, wheelchairs and spectacles – to help these older people be more independent at home and able to join in community activities. We also helped build visibility of the needs of older people through community and school-based education sessions.

### **Training health service providers**

**Bolivia** We supported training for 1,000 health facility staff and municipal government officers on age-friendly models of care and national health insurance (SSPAM) entitlements, run with the Ministry of Health and our partner, Fundación Horizontes.

**DR Congo** We trained 50 doctors and nurses from Goma and Kivu on older people's healthcare, including methodologies for tracking incidence of clinical, mental health and psychological diseases. We are now seeing improved reporting of chronic illnesses affecting older people in the district health information system and are working to extend this to provincial level.

### **Government policy and practice change**

**East Asia homecare programme** The final phase of this programme was completed this year. Through the work of our Affiliate, HelpAge Korea, pilot volunteer homecare schemes were established in 10 East Asian countries, delivering homecare to 4,600 older people. A more important outcome of the programme is that three governments formally adopted national homecare programmes and five more are in the process of doing so.

**Cambodia** Our home-based care model has been fully acknowledged by the government as a proven mechanism for ensuring informal care to older community members. We are now supporting the government to finalise its National Guidelines for homecare.

**Bolivia** As a result of our advocacy work on NCDs and our technical engagements with the government and Pan-American Health Organisation, the government announced the creation of a national Consultative Group on NCDs. A new national plan, Strategic Lines of Action for Older People and Health, has been approved by the Ministry of Health.

**Vietnam** The most recent amendment to Decree 13, The Law for Older People, increased the number of older people eligible for free health insurance. Poor older people will now receive a 70 per

cent discount on health insurance costs, a rise from 50 per cent. Uptake of the insurance has increased from 700,000 in 2010 to 1,300,000 in 2011.

### **Raising awareness of older people's health, HIV and care needs**

**United Nations High-Level Summit on Non-communicable Diseases** The issue of NCDs came onto the global agenda in this UN Summit in September 2011. To prepare for the summit, we played a leading role in convening a group of age-related international and national non-government organisations (NGOs). We formulated a robust position through a series of communication outputs, statements and lobbying of the World Health Organization (WHO) and the leading NGOs in the NCD Alliance and member state governments. The outcomes document contained revisions on the pre-Summit draft, including text proposed by us. We strongly supported the lobby for the inclusion of Alzheimer's disease and other dementias as an NCD challenge, which was also included in the outcomes document.

**United Nations High-Level meeting on HIV and AIDS** We worked with the Care and Support Working Group of the UK Consortium on AIDS and International Development and the Joint United Nations Programme on HIV/AIDS (UNAIDS) to influence the Political Declaration of this meeting. Our engagements included a focused communications package on the key issues for older people. We successfully engaged in the drafting of the Declaration, particularly in providing the definition of care and support and its relationship with older people.

**International Conference on AIDS and Sexually Transmitted Infections in Africa** We worked with WHO, UNAIDS and the University of Sydney to jointly host a pre-conference event, HIV and Ageing in Africa. We developed an online communications strategy in the run-up to and during the conference that resulted in a 17 per cent increase in hits on the HelpAge website.

**WHO Global Health Sector Strategy on HIV and AIDS** We provided submissions to the consultation process that helped ensure specific mention of older women and men. The strategy includes new references to people aged 50 and above, recognition of older people as a vulnerable group in relation to HIV and of the ageing of the epidemic, and a call for attention to older people in NCD programmes.

### **Our plans for 2012-2013:**

We will continue to expand and strengthen our health service delivery work, particularly in relation to preventing and managing NCDs, and community, home and self-care initiatives. We are already seeing a growth in our ophthalmic programming and will build partnerships to ensure its effectiveness and further growth. We will advocate at global, regional and national levels for the recommendations of the UN Summit on NCDs to be realised, and will work to ensure age-inclusive NCD programmes. We will use UN World Health Day as a focal point across our network to mobilise campaigning.

Our new scale-up strategy on HIV and AIDS sets out how we will address the difficulties we are encountering on older people's better access to HIV and AIDS services, social protection and health support they need. The scale-up strategy has a clear plan for increasing our work through service delivery, advocacy and by developing partnerships with larger HIV-focused agencies. We will also emphasise the need for greater social protection support for older people affected and infected by HIV.

To ensure the quality and effectiveness of our work, we will roll-out our new field-based methodologies for assessing the health status of older people in a number of our programmes.

## Global action 3: Enabling older women and men to actively participate in, and be better supported during, emergency and recovery situations

**Our vision** is that older people affected by crises and disasters receive the assistance and protection they need, in accordance with humanitarian principles.

**The reality** is that although older people have specific needs and the potential to contribute to relief efforts, there are only a few programmes that target them specifically and so they continue to be left out of all stages of emergency preparedness, assessments and responses.

About 350 million people are affected by crises and disasters every year, meaning about 35 million older people need assistance. Older people also make up a large proportion of those in displaced people's camps who are left behind in resettlement programmes. Sixty per cent of the world's older people live in developing countries where disasters are more likely to occur and have the biggest impact. Demographic change also means their numbers are growing fast.

Yet our research shows that humanitarian donors do not allocate funding in proportion to need and that older people receive disproportionately little – just 0.2 per cent. Very few emergency responses provide healthcare or support for the diseases older people are living with, putting them at greater risk and increasing their isolation. In recovery, older people need continued psychosocial and financial support, with age-appropriate work or micro-finance opportunities, but they rarely receive it.

### What are our aims?

We want policy-makers and aid workers to understand how humanitarian crises affect older people and to provide an appropriate level of programming support and funding for older people. All organisations must include older people in their emergency responses, in accordance with humanitarian principles.

### How are we doing this?

**Responding directly to the needs of older people in emergencies** and supporting their own recovery efforts afterwards.

**Building a body of operational experience** on how older people can be effectively assisted and protected in emergencies and ensuring we document and share it.

**Increasing our technical expertise** to assist older people in emergencies and implement effective programmes that can influence other actors credibly and effectively.

**Providing a high-quality service to other humanitarian actors** to help them to integrate and mainstream older people in their policy and programmes, including providing secondments and training.

### In 2011-2012, we planned to focus on:

- Supporting older people in sudden onset emergencies and continuing to assist older people in emergency and recovery programmes in the major responses we mounted during 2010-2011.
- Strengthening our technical expertise and evidence, focusing on protection, livelihoods and health, including improved vulnerability and risk analysis.
- Working to see ageing integrated into humanitarian policy and practice, by stronger field-level and headquarters collaborations with targeted agencies.

### Highlights

250,000 older people and their families received emergency relief and recovery support in 18 countries.

100,000 people helped in the drought crisis in Ethiopia and Kenya.

Working with 14 agencies to do more for older people in emergencies – eight more than last year

The UK Government and the UN are thinking more about how to reach older people thanks to our research into humanitarian financing for older people and those with disabilities.



**Measuring our progress**

Original Strategy to 2015 indicator	Output and outcome indicators	Baseline at March 2011	Predicted by March 2012	Actual by March 2012	Changes for 2011-2012
<b>We will enable older people to actively participate in and be better supported during emergency and recovery situations</b>					
<b>Older men and women receive direct assistance from us and our partners to prepare for, withstand and recover from emergencies</b>	Number of countries where we provide humanitarian assistance or recovery programmes	20 countries	25 countries	25 countries	Five countries implemented new emergencies or recovery work this year – Cambodia, Dominican Republic, Kenya, Mozambique and Thailand. Emergency and recovery work was run in 18 countries this year.
	Total number of people benefiting from emergency response and recovery programmes	170,000 people	214,000 people	350,000 people	180,000 more people benefited from our programmes this year. Including people we continued to support from the previous year, we helped 250,000 people in total this year.
<b>Ten major humanitarian agencies recognise and respond to the needs and capacities of older men and women in emergency preparedness, response and recovery</b>	Number of countries where we work to improve national disaster preparedness and response plans	19 countries	20 countries	20 countries	New engagement in Thailand.
	Number of humanitarian agencies that specifically respond to older people's needs in their policy and programmes	6 agencies	8 agencies	14 agencies	We are now engaged with 14 humanitarian agencies <sup>5</sup> to improve their responses to older people's needs in emergencies.

<sup>5</sup> This includes: the UN refugee agency, UN Office for the Coordination of Humanitarian Affairs, UN Needs Assessment Task Force, Assessment Capacities Project, Inter-Agency Standing Committee, Gender Standby Capacity, International Committee of the Red Cross, International Federation of Red Cross and Red Crescent Societies, Médecins Sans Frontières, Handicap International, Merlin, Internal Displacement Monitoring Centre, European Commission's Humanitarian Aid Department, UK Department for International Development and the Swiss Government.

## What did we achieve?

### Responding in emergencies and early recovery

Our emergencies work continued to strengthen this year as a result of further investment in our capacities in needs assessment, health, livelihoods, disaster preparedness and training. This year:

- We responded to emergencies in 18 countries, with five countries implementing new emergencies or recovery work this year – Cambodia, Dominican Republic, Kenya, Mozambique and Thailand.
- We provided 340,000 service instances to 250,000 older people and family and community members. This is a reduction on last year (640,000 service instances to 360,000 people), but reflects the end of the major responses in 2010 in Pakistan, Ethiopia and Haiti.
- The East African drought crisis in Ethiopia and Kenya was the major focus of our disaster response work this year, but smaller responses were also mounted in seven countries – Bangladesh, Bolivia, Cambodia, Mozambique, Pakistan and Thailand.
- We have continued our work in four countries affected by conflict – Colombia, DR Congo, the occupied Palestinian territories and Sudan. In Darfur, Sudan, we have been able to significantly expand our work in eyecare into areas outside the displaced people's camps.
- We continued our support to recovery programmes in five countries – Dominican Republic, Haiti, Japan, Kyrgyzstan and Myanmar. These programmes are now developing into longer term, non-emergency work.
- We trained almost 1,000 government and NGO staff in supporting older people in emergencies and better emergency preparedness for them.
- We used our new Global Emergencies Fund to help facilitate more rapid responses to the crises in Bangladesh, DR Congo, Ethiopia, Kenya, Pakistan, Philippines and Thailand.
- We increased our spending on emergencies, recovery programmes and policy work from £9.4 million to £11.52 million<sup>6</sup>. Our partnership with Age UK and the Disasters Emergency Committee (DEC) continues to be critical to this growth.

Our responses to emergencies included:

**Ethiopia** We supported over 50,000 people in three regional states – Tigray, Oromia and Somali – working with five partners – the Relief Society of Tigray, Action for Development, Gayo Pastoralist Development Initiative, SOS Sahel and the Pastoralist Welfare Organisation. In two states, we helped drought and flood-affected communities in recovery and resilience-building activities. In the third, we provided emergency support for Somali refugees in four refugee camps. Our work used more robust market assessments in its design to ensure a better approach to livelihood recovery. Key interventions included food and cash transfers, rehabilitation of agricultural land and water sources for livestock and shelter support. Inter-agency co-operation with the CAFOD and Oxfam has been an essential feature of the response, working together on needs assessments, cash transfer programme design and an innovative targeting and complaints system in the refugee camps, to ensure greater effectiveness in our work.

**Kenya** We supported 46,000 people in our responses in Dadaab refugee camp and drought affected areas of northern Kenya. In Dadaab, we worked with the United Nations High Commissioner for Refugees (UNHCR) and Lutheran World Federation to alleviate the severe malnutrition of older people, and with Handicap International to provide mobility aids. In drought-affected Mandera County, we provided older people with cash transfers in the form of food vouchers, which enabled them to access basic necessities and water purification tablets. This was designed to address the gap in relief, experienced as a result of the World Food Programme providing half the normal ration, and to recognise that the food rations were inappropriate for older people.

---

<sup>6</sup> We recognise our increased expenditure on emergencies despite a lower number of services delivered this year. Cost per beneficiary is highly susceptible to the type and scope of an emergency, and can also vary due to levels of in-kind income. For example, in 2010-2011, during the Pakistan flooding, response staff salaries and other inputs were paid by our collaborating partner, Merlin. In Ethiopia, our drought response programme had considerable water source renovation activity with low cost per beneficiary ratios.

**Darfur, Sudan** We have adapted our programming since the peace accord last year, with new work for the return and recovery process in rural areas of West Darfur as well as continuing work in the displaced camps. In total, we supported over 35,000 older people and community members, with a major increase in our eyecare work. Some 18,000 people living in rural areas of West Darfur benefited from free ophthalmic treatment services and cataract surgery. Within the 12 displaced camps, work on health, livelihoods, protection and social activities continued. Some 10,000 older people benefited from support to access clinics, medicines and better nutrition and feeding. Our work on supporting longer-term income and food security increased with over 2,500 older people provided training, seeds and tools. A veterinary centre and animal husbandry outreach programme started, including a vaccination programme and training of community animal health workers.

**Thailand** Following severe flooding, we supported our Affiliate, Foundation for Older Persons' Development, and two other local partners to provide support for 9,000 people in Chainat and Singburi provinces and Bangkok. The response provided relief kits containing food and essential items and small cash grants. Health and psychosocial support was provided using our partners' existing homecare volunteer network, allowing the response to be well-focused on those in most need. After the floods receded, the relief organisation, Mercy Malaysia, supported our partner, Rural Elderly Entrepreneurship Development Association, to install 11 water filtration systems in Chainat and Singburi provinces. We are now also working with Chulalongkorn University on a research programme to study the needs and challenges faced by older people during the floods in 2011.

**Dominican Republic** We supported our partner, ALA Dominicana, to work with eight older people's associations from eight communities in the provinces of Jimani and Pedro Santa Ana to improve the assistance and protection of 1,200 older Haitian refugees and their families. The response provided food and potable water rations, essential items and hygiene kits and support to access local health services. We have now commenced employment training to support 800 older people to start up a business or gain other formal or informal employment. Through this work, ALA Dominicana has become a member of the cross-border inter-agency committee that seeks to protect the rights of all Haitian migrants.

**Pakistan** We responded to new flooding following heavy monsoons in Sindh and Balochistan Provinces. Working with partners, Merlin and Qatar Charity, we provided health assistance and distributions of food, essential items, shelter and water supplies to 3,000 families. This immediate intervention was followed by further work on supporting age-friendly health services, eyecare and the distribution of mobility aids. New work in training community- and home-based carers also started.

**Japan** Since the earthquake and tsunami in 2010, our partners, the Young Men's Christian Association, have been supporting 16,500 older people by providing a range of innovative psychosocial and community activities. This included training community carers and volunteers to visit older people in their homes to provide essential aids and heating for older people living in temporary shelter. In particular, a grief counselling service was provided that included using intergenerational events to create a renewed sense of family and community.

### Stepping up the quality of our work

We have continued to invest in more timely and effective responses, better preparedness and promoting greater long-term resilience to crises for those we assist. New advisers for health and nutrition, livelihoods and training provided expertise and training in many of our programmes this year, including in Colombia, Ethiopia, Kenya, occupied Palestinian territories and Sudan. All these have resulted to better practice in our programmes, evaluations and the design of new programmes.

We completed the first stages of a series of new tools to support our work: good practice guidelines on the protection of older people, a training module on older people's nutrition in emergencies, and a new needs assessment tool. These have been piloted this year and will be rolled out across the organisation in the next two years. We have also revised our emergencies manual.

Studies were produced for a number of important areas of our work: assessment of our cash transfer programming in Pakistan, a study on "age-friendly social spaces" based on our work in DR Congo, and a detailed case study on a home-based care model developed in the Gaza emergency programme. These studies and the learning they generated are being used immediately, particularly in the design and implementation of our work in East Africa.

We have also implemented further action to build our compliance with accountability standards (the Humanitarian Accountability Programme and the DEC Accountability Framework). This year, we undertook training, assessment and fieldwork with partners and older people in Thailand, the Philippines, occupied Palestinian territories and Pakistan. Our implementation of the DEC Accountability Framework was evaluated positively in our responses in Ethiopia and Kenya this year, and a peer review by Tearfund and Plan International verified our improved self-assessment.

### Changing attitudes globally

**The Humanitarian Financing Report** Our report in 2010-2011 proved to be a respected and influential piece of evidence, which attracted the attention of donors, UN agencies and other agencies. We released a second study in collaboration with Handicap International this year, which showed similar findings to the 2010-2011 report. This report was included in the Overseas Development Institute (ODI)/Humanitarian Practice Network Newsletter, and published on the ODI website. We have evidence of agencies such as the UK Department for International Development (DFID) and the Spanish Government paying attention to the findings.

**The Inter-Agency Standing Committee (IASC) on Humanitarian Reform** We established a presence in Geneva this year to take forward implementation of the IASC commitments for action on older people in emergencies. There has been good progress relating to a number of key areas: the development of a framework for addressing vulnerabilities associated with age and gender; work with the UN Consolidated Appeals Process (CAP) to promote the inclusion of older people as a standard beneficiary group, and the creation of a sub-working group on non-communicable diseases within the Global Health Cluster.

### Strengthening global and national partnerships

We increased our direct engagements and strategic partnerships from six to 14 agencies this year. These engagements now include: UNHCR, UN Office for the Coordination of Humanitarian Affairs, UN Needs Assessment Task Force, Assessment Capacities Project, the Gender Standby Capacities Project, International Committee of the Red Cross (ICRC), International Federation of Red Cross and Red Crescent Societies (IFRC), Médecins Sans Frontières (MSF), Handicap International, Merlin, Internal Displacement Monitoring Centre, European Commission's Humanitarian Aid department, DFID and the Swiss Government. Some examples our engagement and influence include:

**UNHCR secondments** We supported UNHCR and the Protection Cluster with secondments to UNHCR in Yemen, South Sudan, Kenya and Somalia and made recommendations for better inclusion of older people in policy and practice at field level. Following the Kenya/Somalia deployment, an advocacy paper was produced to highlight the risks faced by older people in the drought response. This was shared with humanitarian partners at field and global levels. An external evaluation of our secondments arrangement found they are making a significant contribution to the protection and assistance of older people through an appropriate, cost-effective and replicable model.

**International Committee of the Red Cross** We trained 35 Geneva-based staff and as a result, ICRC committed to draw up a strategy to enhance the integration of issues related to older age in ICRC programming for 2012-2014. They have committed to further training on ageing issues for their Protection and Assistance Coordinators and new members of staff at ICRC headquarters, and to exchange good practice ideas and learning. A revised ICRC planning tool will ensure that gender and age markers exist to capture older people among their beneficiaries. We also produced a risk profile for older people at their request with key actions to improve integration in programming.

**Médecins Sans Frontières** A joint paper was written with MSF's International President on the humanitarian needs of older people and the implications for a health and nutrition actor such as MSF. This paper was designed to stimulate debate within MSF as a precursor to a wider review of their work. At the same time, in coordination with our emergencies team, MSF-UK began a comparative study of MSF policy and programmes in several countries to find out whether/how older people's needs are addressed and to make recommendations for improvement. We are also producing joint research on the impact of cholera on older people in Haiti and Zimbabwe.

**Handicap International** We have signed an agreement for partnership on humanitarian policy and programming, agreeing to collaborate in five areas: field operations, operational learning, training,

research and donor engagement. This agreement is expected to pave the way for a broader partnership in the future, including in development and rights work.

**UK Department for International Development** We contributed to the consultations on the independent Humanitarian Emergency Response Review (HERR) commissioned by DFID, and ensured that the HERR recommendations included clear commitments on vulnerable groups, including older people. We further engaged with DFID on the implementation of the HERR recommendations. As a result, DFID committed to include indicators on specific vulnerable groups in its programmes, data disaggregation in needs assessments, and to ensure its funding guidelines require that the needs of vulnerable groups are considered as part of programme design.

### **Building preparedness and risk reduction**

We worked to influence national and sub-national disaster risk reduction policies in 20 countries this year, with a new engagement in Thailand. Our most substantive engagements are in Jamaica, Bolivia, Bangladesh, Kyrgyzstan, Mozambique, Myanmar and Pakistan. New consortia programmes that seek to build preparedness and influence policy and practice were started in Bangladesh and Myanmar this year.

In East Asia, we are a board member of the Association of Southeast Asian Nations (ASEAN) partnership group and work closely with the ASEAN Agreement on Disaster Management and Emergency Response. In the Caribbean, we are a member of the Caribbean Disaster Emergency Management Agency's civil society sub-committee. This year, we have two notable areas of work that are strengthening emergency preparedness for ourselves and others:

**ALERT – a new approach to emergency preparedness** We developed this tool this year, which comprises an innovative combination of Minimum Preparedness Actions, scenario planning and new software to monitor and maintain a minimum level of preparedness. The model offers many advantages over existing, contingency planning models. It is expected to make a substantial difference to emergency preparedness in HelpAge, and may be taken up by other agencies. This training and software was piloted in Kenya and will help to ensure our operations are properly prepared to respond to emergencies when they occur.

**The Assessment Capacities Project (ACAPS)** This is an initiative of a consortium of three NGOs (HelpAge International, Merlin and the Norwegian Refugee Council), supported by seven major humanitarian donors, to improve the quality of humanitarian responses by supporting faster and more effective needs assessments. ACAPS works with a wide range of humanitarian stakeholders, including the IASC Needs Assessment Task Force. ACAPS has supported multi-sectoral needs assessments and assessment preparedness in more than 25 contexts over the past two years, including in Haiti, Libya and Ethiopia, and delivered assessment training for a number of different clients, including the United Nations Disaster Assessment and Coordination, IFRC, the Protection Cluster, Care, ASEAN and the Emergencies Capacity Building Project.

### **Our plans for 2012-2013:**

We will continue our responses with older people in eight countries, including our work in the Horn of Africa in responding to the drought crisis. We will respond to new emergencies in these countries and others where our support is required and where we have the capacity to respond.

We will invest in strengthening our preparedness planning for responses across our programmes, with a focus on fragile contexts and countries susceptible to emergencies. This work will include training and the implementation of ALERT. We will continue to develop and expand our training programme on older people in emergencies for our strategic and local partners and for our own staff.

We will continue influencing humanitarian agencies to work more inclusively with older people, building our evidence and good practice guidelines. We will advocate for greater inclusion of older people in humanitarian policy and response, including through our network campaign, On the Edge.

We will support older people and their families in new, sudden-onset emergencies. In fragile contexts and countries experiencing complex political emergencies, we will respond to emergencies and strengthen our programmes.

## Global action 4: Building global and local movements that enable older people to challenge discrimination and claim their rights

**Our vision** is to end age discrimination and see the rights of older people recognised, promoted and protected in national and international law and in practice.

**The reality** is that there is no international human rights convention which specifically protects the rights of older people. The existing human rights system does not adequately address this issue, nor are older people's rights fully integrated into other development or government policies. Older people face discrimination on a daily basis because of their age, which affects their ability to earn a living, their health and their quality of life. All UN Member States committed within the Madrid International Plan of Action on Ageing (MIPAA) to include ageing in all social and economic development policies, and to halve old-age poverty by 2015, in line with the Millennium Development Goals. Yet, only a handful of governments have concrete plans to implement the proposed policies and even fewer are providing dedicated resources to pay for them.

### What is our aim?

We aim to build an agenda-setting civil society movement that can tackle discrimination on the grounds of age, and monitor and engage with national and global policies to ensure they are inclusive of older people.

### How are we doing this?

**Training older people's groups and their communities** to work on specific legal and rights issues, and monitor the delivery of government services and poverty reduction programmes.

**Monitoring international policy processes** to ensure that older people's issues are included, and that older people's organisations are consulted.

**Providing leadership, information, resources and campaigns** to allow older people to claim their rights and entitlements and fight age discrimination.

**Mobilising action on specific violations of older people's rights**, working with older people and activists at community level to address violations.

**Influencing the UN rights system and governments** by providing evidence of specific rights violations, particularly against older women, to ensure that older people's rights are protected in law and in practice.

**Building a growing movement of individuals** around the world who are willing to challenge age discrimination and support claims for their rights.

### In 2011-2012, we planned to focus on:

- Growing our community service provision monitoring work and ensuring older people are able to claim their rights and entitlements.
- Providing leadership, support and information at local and national levels to build confidence and action by individuals, older people's associations (OPAs), national age organisations and other relevant networks.
- Addressing specific legal, rights and abuse issues through work at community level, with older people acting as instigators for change in their communities.
- Supporting movements and strategic partnerships at all levels to create legitimacy, influence and profile of ageing issues, and sustain pressure on governments and society to act.
- Building robust evidence of age discrimination, with older people, to mobilise action to tackle older people's rights, and using this evidence within the UN rights system.

### Highlights

**540 more older people's groups trained to monitor their rights and entitlements with 1,460 groups in place across 23 countries.**

**49,000 more older people helped to claim a pension, benefit or health service.**

**Member States of the new UN Open-ended Working Group on Ageing agreed that more needs to be done to protect the rights of older people.**

**Measuring our progress**

Original Strategy to 2015 indicator	Output and outcome indicators	Baseline at March 2011	Predicted by March 2012	Actual by March 2012	Changes for 2011-2012
<b>We will build global and local movements that enable older people to challenge age discrimination and claim their rights</b>					
<b>Older men and women lead community action to realise their rights to services and practical support in 25 countries</b>	Overall number of OPAs HelpAge works with	2,800 OPAs with 360,000 members	4,200 OPAs with 420,000 members	4,100 OPAs with 470,000 members	1,300 new OPAs were established at project, sub-national and national levels. Growth was recorded across 21 countries.
	Number of OPAs monitoring government service delivery	920 OPAs with 24,000 members	1,250 OPAs with 36,000 members	1,460 OPAs with 33,000 members	540 more OPAs with 9,000 members created, with monitoring structures now established in 23 countries.
	Total number of older people assisted to claim existing entitlements	76,000 older people	133,000 older people	125,000 older people	49,000 more older people receiving entitlements, with significant work recorded in Mozambique, Paraguay, Tanzania, Uganda and Vietnam.
<b>Older men and women are helped by work that prohibits or reduces discrimination against them in 15 countries<sup>7</sup></b>	Number of countries where we work to prohibit or reduce specific issues of abuse or discrimination of older people	8 countries	10 countries	10 countries	Our work with communities on domestic and elder abuse expanded into Moldova and Tajikistan.
	Number of older people taking action locally around specific rights abuses and exclusion from services	28,000 older people	48,000 older people	66,000 older people	12 countries recording increased local activism with 38,000 more older people participating.
	Number of countries where HelpAge is producing reports to UN or other rights mechanisms (including the Committee on the Elimination of Discrimination against Women and the Human Rights Council)	6 reports from 5 countries	11 reports from 7 countries	11 reports from 7 countries	Four reports were submitted – to the Committee on Economic, Social and Cultural Rights and to the Human Rights Council – with new reporting for Tajikistan and Tanzania.
<b>A global group of one million committed supporters is developed by key HelpAge Affiliates</b>	Total number of HelpAge supporters	370,000 supporters (indicative)	540,000 supporters	605,000 supporters	Growth primarily in our community-based work and activism, but increasing participation in Age Demands Action events, petition signing and supporter development by key Affiliates.

<sup>7</sup> Progress towards a UN convention on the rights of older people will be reported below.

## What did we achieve?

### Older people driving change and our work

Older people themselves are the greatest drivers of change and are at the heart of our supporter base. To keep our mission – and that of our Affiliates and partners – relevant and legitimate, we establish OPAs to implement and manage much of our work. We also build older people's skills and leadership capacities so they are able to represent their issues and causes to those who have a duty to support them. Depending on context and culture, these OPAs have different names – self-help groups, older people's monitoring groups, older people's committees – but all work to ensure a stronger voice for older people in decisions that affect them whether at local, national or international level.

During the past two years, we have worked with 4,100 OPAs. This year, 1,300 new older people's associations were formed, trained and supported. We worked actively with about 3,600 OPAs.

### Supporting older people to combat exclusion and discrimination

We have continued to expand our community-based work across 23 countries to mobilise and train groups of older people, to ensure that they are receiving the benefits, services or protection they need from governments or other agencies.

This year, we trained 9,000 older people in 540 new OPAs – making a total of 1,460 OPAs in the last two years – to undertake this monitoring and lobbying work. We estimate over 250,000 older people in the communities where we work received new or better services from government or other agencies. 49,000 older people were directly helped to get documents and register for an entitlement, such as a pension or free health insurance. This number was slightly lower than we aimed for, but often, government capacity to assist has been limited.

Representatives of OPAs also supported our global advocacy this year. We are partners with the United Nations Population Fund (UNFPA) and working with 10 other UN agencies, including the United Nations Development Programme (UNDP), UN Women and the UN Department for Economic and Social Affairs (UNDESA), to produce the report, *Ageing in the Twenty-First Century: A Celebration and a Challenge*. This has permitted a systematic “bottom-up” consultation process with 1,500 older people from 20 countries on their issues and the state of national implementation of ageing policies and government commitments to these.

Some examples of the work OPAs perform are:

**Tanzania** Older people's groups have been supported to create 72 older people's forums for more concerted action on seeing the national ageing policy enacted into law and to enforce its implementation. Key actions by these forums have included liaising with senior government officials and a new special task force of government and civil society groups to prevent the murder of older women accused of witchcraft.

**Kyrgyzstan** Over 240 older women and men worked together as community rapid response teams to act against violence and abuse towards older people. They worked with government Crisis Centres to include older victims of violence and abuse and ensured that the Crisis Centres specialists provided psychological and legal assistance to the most vulnerable older people. To date, over 700 older people have received counselling and 300 have received legal support. The annual national campaign, 16 Days Against Gender Violence, included a focus on violence against older women for the first time.

**Haiti** We supported leaders and members of OPAs to organise practical support for older people in communes and displaced people's camps, and to lobby service providers for better and more specific attention to their needs. OPAs helped organise their Age Demands Action campaign where 5,000 older people marched to highlight their rights. They met with the First Lady of Haiti to bring the problems faced by older people, especially inadequate housing and healthcare, to the attention of the national authorities.

**Philippines** Our Affiliate, Coalition of Services of the Elderly, expanded their national network to 270 OPAs. They built capacity to lobby local government and government agencies to support older people's access to existing government entitlements, in particular payments under the new social pension passed into law in 2010. OPA leaders are also being consulted regularly by the media and by



senate and congress members, notably this year, in relation to a new bill on the protection of older people from abuse.

### **Lobbying the UN rights systems and governments**

We submitted to the UN further evidence of violation of older people's rights globally and in specific countries, including submissions on Moldova and on two new countries, Tajikistan and Tanzania. During the year, we worked with the UN Human Rights Council and the Special Rapporteur on the right to health; the UN Commission for Social Development, focusing on citizen engagement in MIPAA implementation and on the UN Secretary General's report. Outcomes of this work include:

- The report of the Special Rapporteur on the right to health included the specific challenges older people face. This was informed by our written submission of evidence and our participation in an expert group meeting.
- There is evidence of increased attention being paid to older people's right to health by the Human Rights Council in Geneva, supported by our evidence on older people's right to health and an event with Human Rights Watch on palliative care.
- Increased attention to, and national policy recommendations on, older people's rights was given by the Committee on Economic, Social and Cultural Rights (CESR) which made recommendations to the governments of Moldova and Tanzania on older people's poverty and the right to social security.
- As a direct result of our evidence to the Universal Periodic Review, the Government of Tanzania committed to harmonise its legislation on discrimination against women, and to implement a comprehensive legal and policy framework to end discriminatory practices that lead to violence against women and girls, including witchcraft killings.

Overall, we believe that our work has stimulated much greater awareness of and attention to the rights of older people within the UN system.

### **Working towards a convention on the rights of older people**

The year 2010 saw the creation of a new UN Open-ended Working Group on Ageing (OEWG) and a civil society forum, the Global Alliance for the Rights of Older People. These provided opportunities for us to stimulate calls for an international convention that can support an end to age discrimination and violation of older people's rights.

We made two presentations to the OEWG in 2011 on violations of older people's rights and the right to health. At the request of the OEWG, we mobilised participation of older women and men in the OEWG process. Older people's representatives from our work participated in plenary panel presentations, oral interventions from the floor and in an event on the right to health. Member States of the OEWG agreed that more needs to be done to protect the rights of older people.

We also worked to increase collaboration between NGOs working on ageing with the launch of the Global Alliance for the Rights of Older People, which HelpAge actively contributed to in terms of: development of a website, a development of terms of reference, organisation of an event at the OEWG meeting in August 2011, and a panel presentation at a conference on older people's rights in Dijon in January 2012.

In Latin America, we have been working with the Bolivian Government and the Organisation of American States on an Inter-American convention on the rights of older people, including work to modify the draft convention and participation in a regional conference. The Bolivian Government established an inter-institutional committee on the convention, and with our partner, ANAMBO, used the learning provided by the recent review of MIPAA implementation by older people and civil society.

### **Building strategic partnerships**

We recognise that there are many other agencies that have technical expertise or influence that can help to bring changes to the lives of older people, and we have continued to invest effort in working with these. Some examples in the past year include:

**Advancing the social protection agenda** Grow Up Free from Poverty Coalition, UNICEF, Soros Foundation, the World Economic Forum, International Social Security Association, Universities of Oxford, Manchester and East Anglia in the UK and the National Economics University of Vietnam.

**Advancing the non-communicable diseases agenda for older people** The International Longevity Centre, Alzheimer's Disease International, the Global Alliance on the Rights of Older People, the Worldwide Care Alliance, Cordaid, Fred Hollows Foundation, World Health Organization and Pan American Health Organization.

**Better inclusion of older people in HIV programmes** The Caregivers Action Network and the UK Consortium on AIDS and International Development, Regional AIDS Initiative of Southern Africa with Voluntary Service Overseas.

**Advancing the agenda on older people's rights and a convention** Office of the High Commissioner for Human Rights, OEWG, Global Alliance for the Rights of Older People, UNFPA, UNDP, UN Women and UNDESA, Washington University's Academy of Humanitarian and Human Rights Law.

### **Building a movement of individual supporters**

We continued, with our Affiliates and partners, to build activism to see older people treated more fairly and to develop one million people worldwide regularly supporting our work with their time, money and talent. Beyond our work at national levels, we set in place or strengthened a number of areas to build our supporter engagement. This has included:

- A new, structured corporate advocacy agenda.
- A new manual for Age Demand Action campaign organisers.
- A global petition to call for a convention on the rights of older people.
- Increased output on a range of online media through e-newsletters, blogs, Facebook and Twitter and used a Google ad-words campaign.
- Increased targeted online and media outputs around UN international days, such as UN Days for health, elder abuse and widows.
- Commissioned an evaluation of our Age Demands Action campaign, which has generated significant learning on how we can strengthen our work and measure our effectiveness.

This investment is showing some important results in attracting people to our work, with our supporter engagement through website, online and social media and regular publications continuing to grow. Statistics show e-newsletter sign-ups up 30 per cent to 8,700, Facebook supporters up 60 per cent to 2,187, Twitter followers up 80 per cent to 3,687 and a 90 per cent increase in visits to the website to 247,000. Website visits from worldwide visitors have also increased substantially, for example, in South East Asia up 112 per cent to 18,000 and in North America up 118 per cent to 90,000. Our own database of supporters has increased from 10,500 to 13,000 people this year. Our Affiliates – HelpAge Deutschland, HelpAge USA, HelpAge International España, WorldGranny (the Netherlands) and HelpAge Korea now hold about 20,000 regular supporters on their databases.

### **Our plans for 2012-2013:**

We will support a further 800 OPAs to manage projects and to lead on action to include older people in services. We will help our partners and networks of older people's organisations to advocate for policy and practice change by governments and to collect evidence of violations of older people's rights, age discrimination and their exclusion from services. Our aim is to support at least 25 per cent more OPAs to monitor provision of services by government and other agencies and to help a further 100,000 older people register for and claim an existing entitlement.

We will continue to build robust evidence of age discrimination and mobilise groups to tackle older people's rights issues and protect older people in their communities. We will continue to submit our evidence to existing UN mechanisms, including UN Women, CESR and the Universal Periodic Review (UPR) of the UN Human Rights Council.

Using our evidence of age discrimination, results of the participatory reviews on the progress of implementation of MIPAA and the launch of the report with UNFPA, Ageing in the Twenty-First Century: A Celebration and A Challenge, we will continue to promote our call for a new convention on the rights of older people. We will also launch a new online tool, Global AgeWatch, providing data on older people and their issues. Together, these will support our work to influence forthcoming discussions on the post-2015 development agenda.

## Global action 5: Supporting a growing global network of organisations to improve their work with and for older women and men

**Our vision** is a global network of organisations raising awareness and realising the rights of older people and bringing its technical expertise and funding to solve older people's issues with their participation.

With almost 500 million older people living in middle- and low-income countries, a network of age-focused organisations is essential. Our Affiliates and partners are powerful agents of change in their home countries. They provide much-needed services and lobbying, and demonstrate the critical contribution that older people make.

HelpAge was founded to build a global network of organisations working on ageing issues and promoting the rights of older people. This role is unique. Our network encourages organisations to join the global network and movement supporting older people. Together, we will highlight the largely ignored realities of major demographic change, which is resulting in larger older populations.

### Our aims are to:

**Change the aid and government policy environment** that improves the rights and entitlements of older people by members of our network working together with a shared vision and agenda.

**Stimulate learning, sharing and good practice with and for older people** by bringing together the expertise of our network as an authoritative voice on the issues of older people.

**Delivering improvement in the lives of older people** in practical ways by fostering mutual support among network members.

**Ensure HelpAge has strong governance and a strategy** rooted in the experience of older people.

**Build financial support** for our work in the HelpAge network.

### How are we doing this?

**Encouraging strong, committed age organisations** from across the world to join the network and promote the rights of older people.

**Working together** on global campaign platforms and information-sharing opportunities.

**Working together to share expertise and support** across the network to deliver effective and accountable programmes to and with older people.

**Creating financially self-sufficient Affiliates** to deliver their work at national level and to be able to contribute leadership, resources, expertise and learning to others in the network.

### In 2011-2012, we planned to focus on:

- Increase the number of Affiliates and build their understanding of HelpAge's values and obligations.
- Support a common agenda with Affiliates to lead national, regional and international initiatives.
- Support the specific needs of our Organisation for Economic Co-operation and Development (OECD) and emerging economy Affiliates to promote ageing issues and increase their fundraising capacities.
- Use our brand and global campaigning platforms to support the positioning and visibility of the HelpAge International network and the issues it seeks to address.

### Highlights

**59 countries took part in Age Demands Action – half say an immediate change was seen.**

**Our network of Affiliates grew by 10 to 98.**

### We welcome:

*St. Catherine's Community Development Agency (Jamaica)*

*National Foundation for Blind Care (Suriname)*

*Turbota pro Litnih v Ukraini (Ukraine)*

*Ethiopia Elderly and Pensioners National Association*

*Rift Valley Children and Women Development Organisation (Ethiopia)*

*South Sudan Older People's Association*

*Tanzania Mission to the Poor and Disabled (PADI)*

*Asociacion Red Tiempos de Colombia*

*El Wedad Society for Community Rehabilitation (occupied Palestinian territories)*

*HelpAge International España*

## Measuring our progress

Original Strategy to 2015 indicator	Output and outcome indicators	Baseline at March 2011	Predicted by March 2012	Actual by March 2012	Changes for 2011-2012
<b>We will support a growing global network of organisations to improve their work with and for older men and women</b>					
<b>120 Affiliates, adopting the HelpAge values and visual identity, form a global network shaping and supporting a common agenda and leading national, regional and international initiatives</b>	Number of Affiliates	88 Affiliates	94 Affiliates	98 Affiliates	10 new Affiliates
	Number of Affiliates taking on lead role in network initiatives	8 Affiliates	10 Affiliates	11 Affiliates	Work initiated on three regional network initiatives in Latin America and South Asia.
	Number of countries where Affiliates are leading the network programme	41 countries	42 countries	42 countries	Affiliates in Peru are now leading the national programme. HelpAge offices opened in Southern Africa and Nepal to support Affiliate development and programming.
<b>Global and national campaigns take place in 50 countries to demand changes in laws and policies to respect the rights of older men and women</b>	Number of countries where older people are involved in national-level action for improved services	51 countries	60 countries	59 countries with 65,000 participants	Nine new countries participated this year (one was unable to), including Chile, Costa Rica, DR Congo, Germany, Grenada, South Korea, Sweden, Ukraine and the United States of America.
	Number of countries where we work to promote national policies, plans and/or laws on ageing	25 countries	28 countries	26 countries	New engagement with the Government of Burkina Faso. New work predicted in some Caribbean countries and East Asia did not commence.
	Number of older people with potential to benefit from new or improved policies	Zero – we are measuring new policies	1.8m older people	1.7m older people	New social pension and health policies or policy amendments were recorded in Bolivia, Ecuador, Paraguay, Peru, Tanzania and Vietnam.
<b>Awareness of the international ageing agenda is raised through campaigns and development education<sup>8</sup></b>	Total awareness/reach and value of HelpAge brand	Not produced – new indicator	50 million people reached	50 million people reached	New indicator introduced for 2012-2013. Uses commercial methodology to assess the reach of our brand (through online and media coverage, publication use, and campaigning).

<sup>8</sup> Outcomes of joint work to influence UK and European governments and the European Commission is reported below

## What did we achieve?

### A stronger network

- Ten new Affiliates joined from Tanzania, South Sudan, Ethiopia, occupied Palestinian territory, Jamaica, Ukraine, Spain, Suriname and Colombia. We are now 98 Affiliates strong.
- We increased the profile of our Affiliates in our Annual Review 2010-2011 and video, and launched a new Affiliate profile section on the HelpAge website. Eighty Affiliate profiles are now published.
- We helped four Affiliates – HelpAge International España, HelpAge USA, WorldGranny and HelpAge Belize – to strengthen their websites.
- We opened our intranet to Affiliates and developed this to make it easier for Affiliates to share their resources.
- We have increased the range of languages of our regular publications to include Spanish and Russian.
- We opened a new Southern Africa Regional Office to help build the work of the Affiliate network in the region.
- We facilitated regional meetings and thematic learning workshops with Affiliates in East Asia, South Asia and Latin America.
- We worked with Age UK to establish HelpAge International UK, a subsidiary of Age UK that will be responsible for developing advocacy and fundraising in the UK.
- We started new work towards affiliation with our partners in Sweden (Pensioners without Borders) and Finland (Union of Senior Services).

### Affiliates as leaders

We continued to strengthen the role that our Affiliates and partners play in their home countries and in support of our global and regional work. With our Affiliates, we are now operational in 65 countries – five more than last year – and our partners and Affiliates manage programmes independently in 42 of the 65 countries the network operates in.

Affiliates across the network responded robustly this year to our international agendas for the MIPAA+10 review consultations, the UN Summit on Non-communicable Diseases, communications to UN Women, engagement in our Age Demands Action and European development awareness campaigns, and in our work with the UN Open-ended Working Group on Ageing. Joint work is also developing on the post-2015 consultation process by the UN and Member States. Affiliates in Ireland, UK, Germany, Spain, Denmark and USA have already committed to working with their governments.

Some examples of the work of our Affiliates in the network programme include:

**HelpAge Deutschland** organised and hosted the European regional meeting for ten Affiliates. Important agreements for joint influencing within EU were achieved, including the agenda for the 2012 European Year for Active Ageing and of Intergenerational Solidarity and in developing joint position papers to influence EU countries and the European Commission.

**HelpAge Korea and the Tsao Foundation (Singapore)** Older people and their issues were successfully included in the now approved ASEAN Strategic Framework for Social Welfare and Development (2011-2015) and the Bali Declaration on the Enhancement of the Role and Participation of the Persons with Disabilities in the ASEAN Community. Both organisations and HelpAge were recognised for their contributions to the finalisation of these strategies.

**The Latin America Continental Network of Older People's Organisations** This includes several of our Affiliates, and worked at national and regional levels to support the advancement of a regional convention on the rights of older people.

**Fundación ISALUD (Argentina)** provided support in undertaking a study on care systems in the southern cone of Latin America.

**Fundraising for the network** HelpAge Deutschland, HelpAge USA and WorldGranny continue to raise both restricted and unrestricted funds for our work, contributing £1.6 million to our income this year. HelpAge Korea and the Tsao Foundation continued to provide funding and fundraising support for work in the East Asia region. HelpAge India has also been providing training and support on resource development to HelpAge Sri Lanka.

**Age UK** provided £9.6 million to our work in its core grant, emergency appeals and from the Disasters Emergency Committee this year. We have also worked closely in the formation of a new entity, HelpAge International UK, dedicated to advancing public advocacy and support for the ageing and development agenda in the UK. This included work to re-design and re-launch the Sponsor a Grandparent programme with a focus on fragile contexts. Materials were produced for Ethiopia, Colombia, Haiti and Myanmar this year.

### Leading campaigns

Our campaigning and direct work as a network and as a global movement continued to influence positive changes in the policies and practices of governments. An independent evaluation of our campaigning and lobbying work assessed that over 10 million older people have the potential to benefit from policy changes enacted during the past five years. This year alone, new policies were announced that should improve the lives of 1.7 million older people in Latin America, Tanzania and Vietnam.

### Age Demands Action

Our flagship global campaign mobilised 65,000 campaigners in 59 countries to bring awareness of HelpAge, its partners and ageing issues to 50 million people. In the biggest Age Demands Action campaign yet, campaigners met with 89 senior government representatives and secured substantive commitments in 30 countries. Some 32,000 supporters have signed our global petition for a convention to date.

An evaluation of five years of the campaign reported impressive achievements in terms of growth in participation, effectiveness and value for money. Significant improvements in older people's lives have been recorded from participating countries, with 50 per cent of partners able to identify an immediate outcome. Although attribution of policy changes to Age Demands Action is difficult, the activities of Age Demands Action have contributed to important breakthroughs, including:

- Progress on policies for or including older people was made in 21 countries.
- National older people's committees were created in seven countries.
- Pension and social protection programmes were extended, or are being reviewed, in 17 countries.
- Access to health services was improved in 11 countries.
- Public services such as transport or housing were improved in seven countries.

### Development awareness and policy change in Europe

We carried out development awareness activities and policy engagements across Europe and with the European Commission (EC), focusing on better social protection and protection in emergencies for older people. We worked to build and strengthen our Affiliate network in Europe and to work better with influential movements of NGOs to improve EC and global policies. Work this year has included:

**Influencing EU policy** The EC has now accepted and developed a new social protection policy. We engaged in the EC's consultation on this policy as a member of the European Working Group on Social Protection and Decent Work, which works with the EC's Development Cooperation section. We have also built links with the Concord NGO platform which is working to influence the post-2015 development agenda debate and also joined the VOICE network (Voluntary Organisations in Cooperation in Emergencies), which represents 90 European NGOs active in humanitarian aid worldwide. We will use this opportunity to engage with humanitarian policy processes to further influence and work with the European Commission's Humanitarian Aid department, the Council of the EU and the European Parliament.

**Linking Lives programme** This project is tied in with our Age Demands Action campaign. It aims to create online and personal contact between older people in Africa and members of the public and governments in Europe, particularly in the Czech Republic, Ireland, the Netherlands and Slovenia. A focus of our work this year has been to mobilise politicians to support our Linking Lives messaging and to campaign with us for a better deal for older people in EU policy. Our EU partners have gained political support from five members of the European Parliament, with a commitment that they will participate in our campaign events and extend our messaging to the target members of the EU.

**Make it Ageless campaign** We are using the opportunity of 2012 as the European Year for Active Ageing and Intergenerational Solidarity to promote messages on the need for younger generations to influence ageing policy. Make it Ageless is a global grassroots campaign led by older people who are calling for their human rights to be recognised and drawing comparisons of ageing between Europe and the developing world.

### **Our governance**

Affiliate representatives form an important core of our Board. The Board plays a key role in shaping both our strategic direction and operational management. This year, our Board has supported the development of several key areas of our work: our health plan with a particular focus on NCDs, shaping our plans on scaling-up our programming on income security and advising on the future direction of our role and actions as the secretariat of the HelpAge network. We have also begun to discuss both the process and content for our next corporate strategy to 2020.

Our Board and its sub-committees have also provided oversight on a number of key operational issues, including:

- The completion of our agreement with the new entity, HelpAge International UK.
- Reviewing our corporate reports, plans, budgets and accounts.
- Reviewing our corporate risk register and advising on our new bribery policy.
- Providing technical advice and oversight on our public fundraising activities in Spain, Germany, the USA and new market development in East Asia.

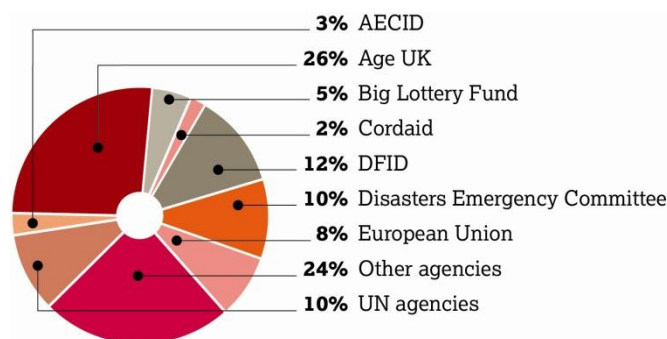
### **Our plans for 2012-2013:**

We will continue and strengthen our network, both in its numbers, and also in the effectiveness of the work. We will support organisations from Brazil, Colombia, Finland, Sweden, Nepal and the Ukraine to become Affiliates.

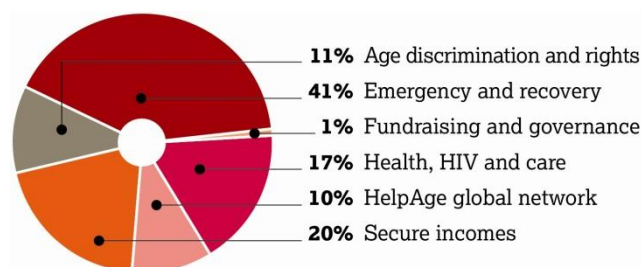
Working with our Board and Affiliates, we will create a “road map” to enhance the engagement of Affiliates in our governance and new strategy to 2020. We will work to understand our network better, completing Affiliate profiles and mapping our capacities and expertise. Using this understanding, we will support Affiliate capacity-building and engagement in programmes, campaigning and public fundraising.

## Financial review

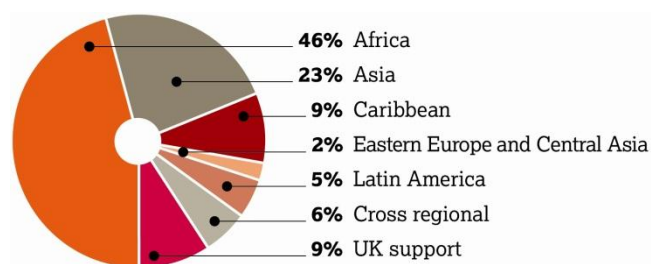
### Where our money came from



### How we spent this money



### Where we spent this money



### Highlights of our financial performance:

	Year to 31 March 2012 £m	Year to 31 March 2011 £m
<b>Income</b>		
Restricted	20.4	20.3
Unrestricted	6.3	5.6
<b>Total income</b>	<b>26.7</b>	<b>25.9</b>
<b>Expenditure</b>		
Restricted	(22.8)	(19.3)
Unrestricted	(5.0)	(5.2)
<b>Total expenditure</b>	<b>(27.8)</b>	<b>(24.5)</b>
<b>Actuarial gain/(loss) on final salary pension</b>	<b>(0.4)</b>	<b>0.3</b>
<b>Funds</b>		
Restricted	3.4	5.8
Unrestricted general	1.4	1.2
Unrestricted Designated	1.1	0
<b>Total funds excluding pension liability</b>	<b>5.9</b>	<b>7.0</b>
Pension reserve	(1.0)	(0.7)
<b>Total funds</b>	<b>4.9</b>	<b>6.3</b>

### Notes:

- Income in 2012 is 3 per cent higher than in 2011
- 96 per cent of income is grant income
- Over 98 per cent of expenditure is on charitable activities
- Fundraising costs for generating voluntary income are very low because we do not raise funds from the public directly
- In accordance with our reserves policy, we have a net increase in unrestricted general funds



## Structure, governance and management

### Status and governing document

HelpAge International is a charitable company limited by guarantee, incorporated on 19 October 1983 and registered as a charity on 17 November 1983. The company was established under a Memorandum of Association, which sets out the objects and powers of the charitable company, and is governed by its Articles of Association.

### Organisational structure

HelpAge International is the secretariat of a network of Affiliates. Affiliation with HelpAge International is a formal relationship which is open to any bona-fide organisation involved in issues of individual or population ageing, with the capacity of working with HelpAge International in its advocacy, research, policy, training, programmatic or fundraising. HelpAge International works with both Affiliates and independent partner organisations at an operational level in the implementation of a specific contract.

HelpAge International's operational and policy development centre is based in London and supports seven regional development centres for Southern Africa, East West and Central Africa, East Asia Pacific, South Asia, Eastern Europe and Central Asia, Latin America, and Caribbean. HelpAge International also works through country development programmes and country project offices.

HelpAge International's approach is based on a commitment to developing grassroots work which benefits older people directly, supporting and strengthening organisations which are working in practical ways to improve the lives of older people and giving a voice to older people, especially the most disadvantaged. Most of our activities are carried out in partnership with older people's organisations, community development organisations and non-governmental organisations (NGOs). We also work closely with academic institutions on research projects and with local and national governments and international agencies to ensure that ageing issues are at the centre of development policies. Working in partnership helps to strengthen the capacity of organisations working with older people, connect experience with government thinking and build a global alliance of organisations working to raise the voice of older people in development processes. HelpAge International also manages programmes directly, especially in difficult circumstances such as conflict and emergencies.

In addition, HelpAge International administers the Sponsor a Grandparent programme funded by Age UK. In 2011-2012 this programme worked through 127 partner organisations and directly through three HelpAge offices (Mozambique, Sudan and Haiti) and supports older people and their dependants. In India, we fund a three-year integrated programme with HelpAge India, implemented directly and through a further 95 sub-grantees.

### Trustees

The trustees are responsible for the overall management and direction of the charity. The Articles of Association allow for a minimum of six and maximum of 15 trustees, at least six of whom are nominated by the Affiliates and up to nine appointed by the Board of Directors, having regard to their relevant qualifications and skills. The overall gender and geographical composition of the Board are also taken into account. The current Board consists of 11 trustees, six from affiliated organisations and five from external organisations.

Trustees are appointed to serve for a term of three years and, at the expiration of this period, may offer themselves for reappointment for two further terms of three years. At the expiration of a third term trustees may not be reappointed. Trustees appointed before 1 October 2011 are eligible to serve for up to two terms of four years after which they may not be reappointed. New trustees are nominated either by the Affiliates or identified by existing trustees or senior staff. All prospective candidates are interviewed by the Chief Executive and a recommendation placed before the Board by the Nominations Committee for consideration and vote. Once appointed, new trustees undertake a comprehensive induction programme, meeting with key staff throughout the organisation.

Trustees are actively involved in supporting and promoting HelpAge International in many different ways according to their interests, specialist skills and location. The Board of Trustees meets twice a year and is supported by three sub-committees: Executive (two meetings per annum), Finance and

Audit (three meetings per annum), and Nominations (which meets as and when required to consider the appointment of new trustees).

### **Connected charities**

Help the Aged was a founder member of HelpAge International. On 1 April 2009 Help the Aged joined with Age Concern to form Age UK. In January 2012 Age UK and HelpAge International established a joint charity HelpAge International UK (known as Age International) with 75 per cent and 25 per cent voting rights respectively. Age International is the UK member of the HelpAge global network of ageing organisations. Age International undertakes awareness-raising, fundraising and influencing activity in the UK to support the work of HelpAge International in developing countries.

The relationship between HelpAge International and Age UK is governed by a Joint Board Committee consisting of four trustees, two from each charity and has the specific task of oversight for delivering our combined responsibility to emergency programmes funded by the Disasters Emergency Committee. There is a formal Framework Agreement to March 2016 between HelpAge International, Age UK and HelpAge International UK which sets out the way in which the Parties work together and the basis upon which grants will be made to HelpAge International. There is also a formal Affiliate Agreement between HelpAge International and HelpAge International UK.

HelpAge International is a participating employer in the Help the Aged final salary pension scheme. The scheme was closed to new members from 31 July 2002 and to future accrual on 30 September 2009. The employer's financial contribution towards the fund deficit is a cost to the charity and full details are included in the annual accounts.

During 2010 HelpAge International established a charitable association in Spain, HelpAge International España, in which HelpAge International has a controlling interest. The results for 2011/12 are not material and have been aggregated with HelpAge International. During 2012 this organisation will become a foundation with an independent board of trustees.

### **Risk management**

The trustees are responsible for ensuring that the major risks facing HelpAge International are managed appropriately and have in place a formal management process to assess risks and implement the appropriate strategies for the management of those risks. A risk register is maintained, based on a formal risk assessment review which is conducted twice a year by senior staff; it covers financial and operational risks and is reviewed at each Board meeting. The trustees are of the opinion that the charity has the appropriate systems in place to mitigate against significant risks. The internal audit plan is designed to provide assurance that the systems are in place and operating as prescribed.

### **Reserves policy**

The trustees have adopted a reserves policy which they consider appropriate to ensure the continued ability of the charity to meet its objectives. The policy was reviewed at the October 2011 board meeting, taking into account risks of loss of income and unplanned costs. The trustees agreed that unrestricted funds (excluding pension fund deficit) should be between £1.2 million and £2.1 million. At 31 March 2012 the level of the unrestricted general fund, before pension provision, had increased to £1.4 million (31 March 2011, £1.2 million). A designated fund of £1.1 million has also been established for the specific purpose of organisational and network development.

### **Pension**

In accordance with FRS17, HelpAge International has obtained an actuarial valuation and recognised a pension liability of £966,000 in the accounts. The deficit does not result in any immediate liability to pay this amount to the pension scheme, as the resulting increase in contributions will be met from expected future income streams. Future contribution rates have been calculated in accordance with the terms of the pension scheme in the light of advice from the actuary and based on the results of the last full triennial valuation of the pension scheme carried out as at September 2009.

### **Public benefit statement**

HelpAge International has developed its aims and strategic plans to ensure that it provides public benefit and achieve the objectives set out in its governing document. These objectives meet the benefit principle defined by the Charities Act 2006.

## Statement of the responsibilities of the trustees

The trustees (who are also directors of HelpAge International for the purposes of company law) are responsible for preparing the report of the trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income or expenditure of the charitable company for that period. In preparing these financial statements the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going-concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware:

- there is no relevant audit information of which the charitable company's auditors are unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of the financial statements may differ from legislation in other jurisdictions.

Members of the charity guarantee to contribute an amount not exceeding £5 to the assets of the charity in the event of winding up while he or she is a member or within one year after he or she ceases to be a member. The total number of such guarantees at 31 March 2012 was 16 (2011:15). The trustees are members of the charity but this entitles them only to voting rights. The trustees have no beneficial interest in the charity.

### Auditors

Sayer Vincent was re-appointed as the charitable company's auditors during the year and have expressed their willingness to continue in that capacity.

Approved by the trustees and signed on their behalf by:

**Nicholas Barr**



Trustee  
21<sup>st</sup> September 2012

## **Independent auditor's report**

We have audited the financial statements of HelpAge International for the year ended 31 March 2012 which comprise the statement of financial activities, balance sheet, cash flow statement and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members, as a body, for our audit work, for this report, or for the opinions we have formed.

### **Respective responsibilities of the trustees and auditors**

As explained more fully in the statement of the responsibilities of the trustees set out in the report of the trustees, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

### **Scope of the audit of the financial statements**

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the trustees; and the overall presentation of the financial statements. In addition, we read all the financial and non-financial information in the report of the trustees to identify material inconsistencies with the audited financial statements. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

### **Opinion on the financial statements**

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2012 and of its incoming resources and application of the resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- the financial statements have been prepared in accordance with the Companies Act 2006.

### **Opinion on other matter prescribed by the Companies Act 2006**

In our opinion the information given in the report of the trustees for the financial year for which the financial statements are prepared is consistent with the financial statements.

### **Matters on which we are required to report by exception**

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or

**Independent auditor's report  
to the members of HelpAge International  
for the period ended 31 March 2012**

- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.



**Catherine L. Sayer (Senior Statutory Auditor) for and on behalf of SAYER VINCENT,  
Chartered accountants & statutory auditors, 8 Angel Gate, City Road, London, EC1V 2SJ**

**28<sup>th</sup> September 2012**

## Statement of financial activities

(Incorporating an income and expenditure account)

	Note	Restricted £000	Unrestricted £000	Year ended 31 March 2012 £000	Year ended 31 March 2011 £000
<b>Incoming resources</b>					
<b><i>Incoming resources from generated funds</i></b>					
Voluntary income:					
Fees, donations, gifts and awards	2	7	1,076	1,083	78
Core grants for international programmes	2	7,650	4,655	12,305	10,436
Total voluntary income		7,657	5,731	13,388	10,514
Other grants for international programmes	3	12,735	587	13,322	15,443
Investment income		4	3	7	6
<b>Total incoming resources</b>		<b>20,396</b>	<b>6,321</b>	<b>26,717</b>	<b>25,963</b>
<b>Resources expended</b>					
<b><i>Costs of generating funds</i></b>					
<i>Costs of generating voluntary income</i>					
			337	337	41
<b><i>Charitable activities</i></b>					
Secure income		5,010	564	5,574	4,753
Health, HIV and care		4,449	471	4,920	4,340
Emergency and recovery		10,347	1,046	11,393	9,489
Age discrimination and rights		2,627	472	3,099	3,302
Global network		508	1,849	2,357	2,348
Sub-total		22,941	4,739	27,680	24,273
Transfer from fixed asset fund		(133)	0	(133)	(18)
<i>Governance costs</i>		0	237	237	241
<b>Total resources expended</b>	4	<b>22,808</b>	<b>4,976</b>	<b>27,784</b>	<b>24,496</b>
Net incoming resources before gains and losses	6	(2,412)	1,345	(1,067)	1,467
Transfers between funds	14	(26)	26	0	0
Actuarial gains/(losses) on defined benefit pension scheme	15	0	(363)	(363)	279
<b>Net movement in funds</b>		<b>(2,438)</b>	<b>1,008</b>	<b>(1,430)</b>	<b>1,746</b>
<b>Reconciliation of funds</b>					
<b>Funds at the start of the year</b>		<b>5,805</b>	<b>527</b>	<b>6,332</b>	<b>4,586</b>
<b>Total funds carried forward</b>		<b>3,367</b>	<b>1,535</b>	<b>4,902</b>	<b>6,332</b>

## Balance sheet

	Note	31 March 2012 £000	31 March 2011 £000
<b>Fixed assets</b>			
Tangible fixed assets	9	491	333
<b>Current assets</b>			
Debtors	10	2,893	1,514
Cash at bank and in hand		5,126	6,392
		8,019	7,906
<b>Current liabilities</b>			
Creditors: amounts due within one year	11	(2,190)	(895)
		5,829	7,011
<b>Total assets less current liabilities</b>		6,320	7,344
<b>Provisions</b>	12	(452)	(325)
<b>Net assets excluding pension liability</b>		5,868	7,019
Defined benefit pension scheme liability	15	(966)	(687)
<b>Net assets including pension liability</b>	13	4,902	6,332
<b>The funds of the charity</b>			
<b>Restricted funds</b>			
Restricted income funds		2,971	5,542
Restricted fixed asset fund		396	263
<b>Total restricted funds</b>		3,367	5,805
<b>Unrestricted funds</b>			
General funds		1,401	1,214
Designated funds		1,100	0
<b>Total unrestricted funds excluding pension liability</b>		2,501	1,214
<b>Total funds excluding pension liability</b>		5,868	7,019
Pension reserve		(966)	(687)
<b>Total charity funds</b>		4,902	6,332

Approved by the trustees: on 21<sup>st</sup> September 2012 and signed on their behalf by:



Nicholas Barr  
Trustee

**Cashflow statement**

	<b>Year ended 31 March 2012</b>	Year ended 31 March 2011
Note	<b>£000</b>	£000
<b>Reconciliation of net outgoing resources to net cash flow from operating activities</b>		
<b>Net incoming / (outgoing) resources</b>	<b>(1,074)</b>	1,461
Depreciation charge	9      170	147
(Increase) / decrease in debtors	10      (1,379)	(306)
(Decrease) / increase in creditors	11      1,295	367
Transfers to provisions	12      166	63
Use of provisions	12      (39)	(31)
Defined benefit pension scheme:		
Impact on net incoming resources before gains and losses	15      13	20
Employer contributions paid	15      (97)	(46)
Investment income	0	0
<b>Net cash inflow from operating activities</b>	<b>(945)</b>	1,675
<b>Net cash inflow from operating activities</b>	<b>(945)</b>	1,675
<b>Returns on investments and servicing of finance</b>		
Interest receivable	7	6
<b>Capital expenditure &amp; financial investment</b>		
Disposal of tangible fixed assets	16	0
Purchase of tangible fixed assets	9      (344)	(201)
<b>Increase in cash in the year</b>	<b>(1,266)</b>	1,480
<b>Reconciliation of net cash funds</b>		
Net cash funds at the beginning of the year	6,392	4,912
Increase in cash in the year	(1,266)	1,480
<b>Net cash funds at the end of the year</b>	<b>5,126</b>	6,392



## Notes to the financial statements

### 1. Accounting policies

#### a) Accounting convention

The financial statements have been prepared under the historical cost convention and in accordance with applicable accounting standards and the Companies Act 2006. They follow the recommendations in the Statement of Recommended Practice, Accounting and Reporting by Charities (issued in March 2005).

#### b) Fund accounting

**Restricted funds** are used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund, together with a fair allocation of management and support costs.

**General funds** are unrestricted funds that are available for use at the discretion of the trustees in the furtherance of the general objectives of the charity and which have not been designated for other purposes.

**Designated funds** comprise unrestricted funds that have been set aside by the trustees for particular purposes. The aim and use of each designated fund is set out in the notes to the financial statement.

#### c) Foreign exchange

Monetary assets and liabilities in foreign currencies are translated into sterling at the rates of exchange ruling at the balance sheet date. Transactions in foreign currencies are translated into sterling at the average rate of exchange in the month of the transaction. All exchange rate differences are taken to the Statement of Financial Activities (SOFA).

#### d) Income recognition

Donations are accounted for at the time of receipt. Gifts in kind are accounted for at estimated market value.

Grant income is recognised when the income is received or receivable, whichever is earlier. In applying this policy HelpAge International recognises income from grants when claims are made to donors in accordance with its individual funding agreements.

Bank interest is the amount receivable for the year.

#### e) Resources expended

Resources expended are allocated to the particular activity where the cost relates directly to that activity. Resources expended include attributable VAT which cannot be recovered. However, the cost of support, management and administration of each activity is apportioned on the basis of an estimated time allocation against each theme.

The costs of generating voluntary income relate to the expenditure incurred by the charitable company in raising funds for its activities.

Governance costs are the costs associated with the governance arrangements of the charity, including meeting all constitutional and statutory requirements.

Grants payable are accounted for in line with the payment schedule stipulated in the agreement, providing the conditions set have been met.

#### f) Fixed assets and depreciation

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life. The depreciation rate in use was as follows:

Computer equipment	4 years
Office equipment	4 years
Overseas project assets	4 years

Assets with a cost of over £250 are capitalised.

#### g) Terminal benefit provision

Most staff employed in offices overseas on local contracts are eligible to a service related terminal benefit for each full year of service when they leave HelpAge International. Expatriate staff are eligible for a service related relocation allowance. These benefits are accrued during the years of service.

**h) Pension costs**

HelpAge International contributes to a multi-employer defined contribution scheme, the cost of which is charged to the SOFA as resources expended when the contributions fall due.

**2. Voluntary income**

			Year ended 31 March 2012	Year ended 31 March 2011
	Restricted £000	Unrestricted £000	Total £000	Total £000
<b>Core grants for international programmes :</b>				
Department for International Development <sup>I</sup>	0	2,670	2,670	1,870
Age UK <sup>II</sup>	7,650	1,985	9,635	8,566
	7,650	4,655	12,305	10,436
Membership fees	0	6	6	6
Donations & legacies	4	115	119	72
Hilton Foundation <sup>III</sup>	0	955	955	0
Gifts in kind	3	0	3	0
	7,657	5,731	13,388	10,514

<sup>I</sup> Income from Department for International Development is a Partnership Programme Arrangement grant

<sup>II</sup> Income from Age UK

Unrestricted core grant	1,781
Sponsor a Grandparent	2,114
Restricted grant for work in emergency and countries with complex political emergencies	2,605
	<b>6,500</b>
Appeal and other restricted funds	412
Disasters Emergency Committee	2,723
	<b>9,635</b>

**Income from Disasters Emergency Committee via Age UK**

East Africa drought	951
Haiti earthquake	1,108
Pakistan flood response	593
Philippines typhoon	71
<b>Total Disaster Emergency Committee funds</b>	<b>2,723</b>

<sup>III</sup> HelpAge International was awarded the US\$1,500,000 (£955,000) Conrad N. Hilton Humanitarian Prize for 2012.

**3. Grants received for international programmes**

	Year ended		Year ended
	Restricted	Unrestricted	31 March 2011
	£000	£000	Total
			£000
Big Lottery Fund	1,236	0	1,236
Department for International Development	498	1	499
Irish Aid	0	0	0
European Commission	2,073	154	2,227
Swedish International Development Cooperation Agency	1,418	8	1,426
Cordaid	489	25	514
UN agencies	2,549	187	2,736
Royal Netherlands Embassy	532	0	532
Agencia Española de Cooperación Internacional para el Desarrollo	687	70	757
WorldGranny	114	9	123
Other agencies	3,035	118	3,153
<b>Total</b>	<b>12,631</b>	<b>572</b>	<b>13,203</b>
Other income	104	15	119
<b>Total</b>	<b>12,735</b>	<b>587</b>	<b>13,322</b>

**Income from the Big Lottery Fund was received for:**

	Contract number	Income	Fund balance
		£000	£000
Older people and HIV and AIDS in Africa	IS/2/010281292	1,094	304
Sukumaland older women's rights programme	ICB/1/010249966	35	0
Poverty reduction and community action	ICB/1/01030983	107	32
		<b>1,236</b>	<b>336</b>

**Income received from Cordaid was received for:**

	Contract number	Income
		£000
Improved income security for older and vulnerable people	106417	344
Meeting health and recovery needs of older returnees, northern Sri Lanka	103972	52
Improved access to health rights and entitlements of older people	2008/3OZ/JPI/C2267	54
Health rights and entitlements for older people in Morogoro	154/10181	64
		<b>514</b>

**Income from Department for International Development included funding for:**

	Contract number	Income
		£000
Assessing and mitigating the seasonality of poverty	SIF 09/10	30
HSNP: Social protection rights component	CNTR 07 7958	220
Assessment capacity project	ARIES 201109	249
		<b>499</b>

**4. Total resources expended**

	Staff related costs (Note 7) £000	Programme costs £000	General office costs £000	Travel and related costs £000	Grants (Note 5) £000	Legal and professional fees £000	Fixed asset fund £000	Total £000
Cost of generating voluntary funds	98	15	220	4	0	0	0	337
Secure income	1,755	1,570	67	332	1,827	23	0	5,574
Health, HIV and care	1,565	1,134	52	256	1,888	25	0	4,920
Emergency and recovery	3,426	4,011	119	541	3,266	30	0	11,393
Age discrimination and rights	1,061	1,038	61	202	709	28	0	3,099
Global network	1,282	456	134	133	260	92	0	2,357
Governance	136	2	6	69	0	24	0	237
Fixed Asset fund	0	0	0	0	0	0	(133)	(133)
<b>To 31 March 2012</b>	<b>9,323</b>	<b>8,226</b>	<b>659</b>	<b>1,537</b>	<b>7,950</b>	<b>222</b>	<b>(133)</b>	<b>27,784</b>
To 31 March 2011	8,482	7,097	366	1,518	6,967	84	(18)	24,496

**4a) The Assessment Capacities Project (ACAPS)**

Total resources expended on emergencies include £1,795,000 spent by the ACAPS consortium.

**5. Grants paid to Affiliates and partner organisations**

	Year ended 31 March 2012 £000	Year ended 31 March 2011 £000
HelpAge India	863	710
Norwegian Refugee Council	692	460
Action for Development – Ethiopia	519	67
Africa Platform for Social Protection – Kenya	359	143
HelpAge Kenya	339	409
HelpAge Sri Lanka	269	396
Gravis – India	234	178
Uganda Reach the Aged Association – Uganda	223	170
Rural Agency for Community Development and Assistance – Kenya	199	21
Save the Children – Mozambique	186	0
SOS Sahel – Ethiopia	176	0
Pastoralist Welfare Organization – Ethiopia	173	0
Coalition of Services of the Elderly – the Philippines	154	219
Relief Society of Tigray – Ethiopia	151	92
El Wedad Society for Community Rehabilitation – occupied Palestinian territories	141	0
Shaanxi Provincial Committee on Ageing – China	116	70
Young Men’s Christian Association – Myanmar	98	34
Network Activity Group – Myanmar	96	188
Resource Integration Centre – Bangladesh	93	115
Tearfund – Mozambique	88	88
Fundación Horizontes – Bolivia	85	56
Muthande Society for the Aged – South Africa	84	91
Tanzania Mission to the Poor and Disabled – Tanzania	72	70
Nepal Participatory Action Network – Nepal	64	25
Young Men’s Christian Association – Japan	63	0
Cordaid – the Netherlands	61	0
Tesfa Social and Development Association – Ethiopia	57	84
Morogoro Retired Teachers Association – Tanzania	57	66
Associação Humanitária de Apoio á Velhice – Mozambique	55	50
Other grants individually of less than £50,000	2,183	3,165
	<b>7,950</b>	<b>6,967</b>

**6. Net incoming resources for the period**

This is stated after charging / (crediting)

Other finance income:

Expected return on pension assets

Interest cost on pension scheme liabilities

Net other finance cost of pension scheme

Depreciation

Trustees indemnity insurance

Trustees remuneration

Trustees expenses

**Auditors remuneration:**

Audit

Other services

During the period no trustee received any remuneration. Trustees' expenses are for the reimbursement of travel, accommodation and subsistence costs for attendance at all meetings held throughout the period.

The UK office is leased from Age UK at a commercial rent.

	Year ended 31 March 2012 £000	Year ended 31 March 2011 £000
	(214)	(221)
	212	229
	(2)	8

	170	147
--	-----	-----

	5	5
--	---	---

	0	0
--	---	---

	46	44
--	----	----

	13	13
--	----	----

	14	6
--	----	---

**7. Staff costs and numbers**

a) Average number of employees during the year was as follows:

Staff on UK payroll based in UK

Staff on UK payroll based overseas

Overseas staff on local contracts

	Year ended 31 March 2012 Staff	Year ended 31 March 2011 Staff
	70	70
	40	44
	110	114
	400	408
	510	522

b) UK paid staff costs were as follows:

Salaries and wages

Social security costs

Pension cost

Overseas staff on local contracts

Other staff related costs

	£000	£000
	3,313	3,289
	242	210
	140	136
	3,695	3,635
	2,480	2,409
	3,148	2,438
	9,323	8,482

Other staff related costs include staff training, fees paid to consultants, per diems paid for attending workshops and other non-salary costs including £96,500 as an additional contribution towards the defined benefit pension scheme.

c) The number of staff whose emoluments fell within each of the following bands were;

£60,000 to £69,999

£70,000 to £79,999

£80,000 and above

	Year ended 31 March 2012	Year ended 31 March 2011
	2	2
	1	0
	1	1

Remuneration excludes employer's pension contributions of £24,108 paid into defined contribution schemes for all three higher paid members of staff.

**8. Taxation**

The charity is exempt from corporation tax, as all its income is charitable and is applied for charitable expenditure.

**9. Tangible fixed assets**

	International Project assets £000	UK assets £000	31 March 2012 Total assets £000	31 March 2011 Total assets £000
<b>Cost</b>				
At the start of the year	922	179	1,101	1,085
Additions	292	52	344	201
Disposals	(98)	(89)	(187)	(185)
At the end of the year	1,116	142	1,258	1,101
<b>Depreciation</b>				
At the start of the year	659	109	768	806
Charge for the year	148	22	170	147
Disposals	(87)	(84)	(171)	(185)
At the end of the year	720	47	767	768
<b>Net book value</b>				
At the end of the year	396	95	491	333
At the start of the year	263	70	333	279

**10. Debtors**

	31 March 2012 £000	31 March 2011 £000
Other debtors	155	91
Prepayments	16	21
Accrued income	2,722	1,402
	<b>2,893</b>	<b>1,514</b>

**11. Creditors: amounts due within one year**

	31 March 2012 £000	31 March 2011 £000
Taxation and social security	0	0
Accruals	1,162	461
Other creditors	803	434
Loans	225	0
	<b>2,190</b>	<b>895</b>

**12. Provisions**

	31 March 2012 £000	31 March 2011 £000
<b>Provision for terminal benefits</b>		
At the start of the year	325	293
Charged for the year	166	63
Utilised in year	(39)	(31)
At the end of the year	<b>452</b>	<b>325</b>

**13. Analysis of net assets between funds**

	Restricted £000	Unrestricted £000	Total funds £000
Tangible fixed assets	396	95	491
Net current assets less provision	2,971	2,406	5,377
Pension liability	0	(966)	(966)
<b>Net assets at the end of the year</b>	<b>3,367</b>	<b>1,535</b>	<b>4,902</b>

**14. Funds movement**

	At the start of the year £000	Incoming resources £000	Outgoing resources £000	Transfer valuation/ actuarial gain £000	At the end of the year £000
<b>Restricted funds:</b>					
Africa	2,440	8,781	10,606	0	615
East Asia/Pacific	378	2,317	2,324	0	371
South Asia	447	2,663	2,996	0	114
Caribbean	476	1,570	1,936	0	110
Eastern Europe & Central Asia	121	518	511	0	128
Latin America	319	990	1,088	0	221
UK and other	1,361	3,557	3,480	(26)*	1,412
Fixed asset fund	263	0	(133)	0	396
<b>Total restricted funds</b>	<b>5,805</b>	<b>20,396</b>	<b>22,808</b>	<b>(26)</b>	<b>3,367</b>
<b>Unrestricted funds:</b>					
General reserve	1,214	6,321	5,060	(1,074)	1,401
Designated reserve	0	0	0	1,100	1,100
<b>Total unrestricted funds</b>	<b>1,214</b>	<b>6,321</b>	<b>5,060</b>	<b>26</b>	<b>2,501</b>
Pension reserve	(687)	0	(84)	(363)	(966)
<b>Total funds</b>	<b>6,332</b>	<b>26,717</b>	<b>27,784</b>	<b>(363)</b>	<b>4,902</b>

\* HelpAge International España public funds were incorrectly classified as restricted funds in financial year 2010/11. They are corrected as unrestricted funds in financial year 2011/12.

**Purposes of restricted funds and unrestricted funds**

The charity has various funds for which it is responsible and which require separate disclosure.

These are as follows:

**Restricted funds**

Income where the donor specifies the purposes within the overall aims of the organisation.

**Fixed asset fund**

The fixed asset fund represents the net book value of assets held overseas purchased with restricted income. The full purchase cost is included within total resources expended as this is consistent with the basis of reporting to donors. The change in net book value is credited against expenditure in SOFA.

**Pension fund**

The pension fund represents the pension liability based on an actuarial valuation by The Pensions Trust. The transfer between funds on the balance sheet represents the actuarial gain for the year.

**Unrestricted funds**

**General reserve:** Unrestricted funds which are expendable at the discretion of the trustees in furtherance of the objectives of the charity. In addition to expenditure directly on international work, such funds may be held in order to finance working capital.

**Designated reserve:** Unrestricted funds which are expendable at the discretion of the trustees in furtherance of the specific purpose of organisational and network development.

**15. The Pensions Trust – Help the Aged Final Salary Scheme****FRS 17 disclosures for accounting period ending 31 March 2012**

The Scheme is a defined benefit (final salary) funded pension scheme. The Scheme is closed to new entrants and to future accrual of benefits, but has retained the salary link for active members

The employer expects to contribute approximately £96,500 for the year starting 1 April 2012. The current arrangements regarding contribution rates are described in a Schedule of Contributions dated 31 March 2012. These contributions include an allowance for administration expenses and PPF levies.

The Scheme assets neither include investments issued by HelpAge International nor any property occupied by HelpAge International.

The overall expected rate of return of the Scheme assets has been based on the average expected return for each asset class, weighted by the amount of assets in each class. The Scheme has no contingent assets or liabilities.

The Scheme holds quoted securities, and these have been valued at current bid-price. The corresponding amounts from previous years have not been restated.

**Employee benefit obligations**

	Value at 31 March 2012 £000	Value at 31 March 2011 £000
Present value of funded obligations	(4,225)	(3,915)
Fair value of scheme assets	3,259	3,228
(Deficit)/ Surplus in the scheme	(966)	(687)

**The amounts recognised in the Statement of Financial Activities are as follows:**

Current service cost	15	12
Interest cost	212	229
Expected return on Scheme assets	(214)	(221)
Losses / (gains) on settlements and curtailments	0	0
<b>Total</b>	<b>13</b>	<b>20</b>

The current service cost includes the cost of administration expenses and PPF levies.

**Actuarial gains and losses**

Net actuarial gains/(losses) recognised in year	(363)	279
Net cumulative actuarial gains/(losses)	(686)	(323)



**15. The Pensions Trust – Help the Aged Final Salary Scheme (cont.)**

**Reconciliation of present value of scheme liabilities and assets**

**Change in the present value of the defined benefit obligation**

	Value at 31 March 2012 £000	Value at 31 March 2011 £000
Opening defined benefit obligation	3,915	4,067
Current service cost	15	12
Interest cost	212	229
Employee contributions	0	0
Experience gain/(loss) arising on scheme liabilities	68	27
Losses/(gains) on curtailments	0	0
Actuarial losses/(gains)	151	(309)
Benefits paid (including expenses)	(136)	(111)
Closing defined benefit obligation	4,225	3,915

**Change in the fair value of Scheme assets**

	Value at 31 March 2012 £000	Value at 31 March 2011 £000
Opening fair value of Scheme assets	3,228	3,075
Expected return on Scheme assets	214	221
Actuarial gains/(losses)	(144)	(3)
Employer contributions	97	46
Employee contributions	0	0
Benefits paid (including expenses)	(136)	(111)
Closing fair value of Scheme assets	3,259	3,228

**Assets in the Scheme as a percentage of total Scheme assets**

	At 31 March 2012	At 31 March 2011
Gilts/fixed interest gilts	37%	16%
Bonds/fixed interest bonds	0%	16%
Equities	62%	61%
Property	0%	7%
Cash	1%	0%
	2012 £000	2011 £000
Actual return on Scheme assets	70	218

**Assumptions**

**Principal actuarial assumptions at the balance sheet date**

	At 31 March 2012 p.a.	At 31 March 2011 p.a.
<b>Financial assumptions</b>		
Discount rate	5.00%	5.50%
Rate of increase in salaries	3.20%	3.20%
Rate of increase in payment of pre 2005 pensions (in excess of GMP)	2.20%	2.70%
Rate of increase in payment of post 2005 pensions (in excess of GMP)	2.20%	2.50%
Rate of revaluation of deferred pensions in excess of the GMP	3.20%	3.20%
Inflation assumption (RPI)	3.20%	3.20%
Inflation assumption (CPI)	2.20%	2.70%
Expected return on scheme assets	5.46%	6.67%

**15. The Pensions Trust-Help the Aged Final Salary Scheme (contd.)**

Demographic assumptions	2012	2011
Mortality	SAPS Normal Health Year of Birth Medium Cohort	SAPS Normal Health Year of Birth Medium Cohort
Cash commutation allowance	80% of maximum tax free cash taken based on factors used in the scheme funding valuation as at 30 Sept 2009	80% of maximum tax free cash taken based on factors used in the scheme funding valuation at 30 Sept 2009
Withdrawal allowance	Allowance	Allowance

Other assumptions are the same as those used in the preliminary results of the Trustees' Scheme Funding valuation as at 30 September 2009.

**Assets in the Scheme as a percentage of total Scheme assets**

	At 31 March 2012	At 31 March 2011
Gilts/fixed interest gilts	37%	16%
Bonds/fixed interest bonds	0%	16%
Equities	62%	61%
Property	0%	7%
Cash	1%	0%
	2012	2011
	£000	£000
<b>Actual return on Scheme assets</b>	<b>70</b>	<b>218</b>

**History of experience gains and losses**

	2012	2011	2010	2009	2008	2007
	£000	£000	£000	£000	£000	£000
Defined benefit obligation	(4,225)	(3,915)	(4,067)	(2,967)	(3,372)	(3,391)
Scheme assets	3,259	3,228	3,075	2,341	2,965	2,921
Surplus/(deficit)	(966)	(687)	(992)	(626)	(407)	(470)
Experience adjustments on Scheme liabilities	(68)	(27)	115	0	(7)	(151)
Experience adjustments on Scheme assets	(144)	(3)	571	(886)	(274)	33

Note: This refers to the expected rated of return on assets as at the beginning of each period presented.

**16. Contingent liability**

The charity works in countries where income tax regimes have changed. The charity pays income tax in all countries where there is a clear obligation to do so. However, it is uncertain whether any liability for income tax for past services of international staff will crystallise. No provision has been made as it is uncertain whether a liability will arise. It is estimated that the value of such liability would be £200,000.

## Legal and administrative details

<b>Status</b>	The organisation is a charitable company limited by guarantee, incorporated on 19 October 1983 and registered as a charity on 17 November 1983.	
<b>Governing document</b>	The Company was established under a Memorandum of Association, which sets out the objects and powers of the charitable company, and is governed by its Articles of Association.	
<b>Company number</b>	1762840	
<b>Charity number</b>	288180	
<b>Registered office and operational address</b>	1-6 Tavistock Square, London, WC1H 9NA	
<b>Trustees</b>	<p>Tilak de Zoysa (Chair)</p> <p>Cynthia Cox Roman (Vice Chair) *</p> <p>Isabella Aboderin (joined March 2012)</p> <p>Nicholas Barr</p> <p>Luz Barreto (passed away October 2011) *</p> <p>Mathew Cherian</p> <p>Silvia Gascón (resigned October 2011) *</p> <p>Pham Hoai Giang *</p> <p>Cho Hyunse</p> <p>Eric Kimani *</p> <p>Sanja Miloradovic *</p> <p>Du Peng</p> <p>Vindrani Shillingford (retired October 2011) *</p> <p>Edith Sayo Skweyiya (retired October 2011) *</p> <p>Michael Wade</p> <p>* denotes trustees nominated by our Affiliates</p>	
<b>Senior staff</b>	Richard Blewitt	Chief Executive Officer
	Silvia Stefanoni	Deputy Chief Executive / Director of Programmes
	Alison Gordon	Director of Resource Development
	Mark Gorman	Director of Strategic Development
	Jane Scobie	Director of Advocacy and Communication
	Valerie Stevens	Director of Finance / Company Secretary
<b>Bankers</b>	Barclays Bank plc, 1 Pall Mall East, London, SW1Y 5AX	
<b>Solicitors</b>	Cobbetts LLP, 70 Grays Inn Road, London, WC1X 8BT	
<b>Auditors</b>	Sayer Vincent, Chartered accountants and registered auditors, 8 Angel Gate, City Road, London, EC1V 2SJ	

## Our Affiliates

### Latin America

Fundación ISALUD, Argentina  
Fundación Horizontes, Bolivia  
Pro Vida Bolivia  
Caritas Chile  
Red de Programas Para el Adulto Mayor, Chile  
Asociación Red Tiempos de Colombia  
CESTRA, Colombia  
Pro Vida Colombia  
AGECO, Costa Rica  
Haitian Society for the Blind (SHAA)  
CAPIS, Peru  
Centro Proceso Social, Peru  
CooperAcción, Peru  
IPEMIN, Peru  
Peru Co-ordinating Group for Older People (Mesa de Trabajo)  
Pro Vida Peru

### Caribbean

Society of St Vincent de Paul, Antigua  
HelpAge Barbados  
HelpAge Belize  
Dominica Council on Ageing  
REACH Dominica  
Extended Care through Hope and Optimism (ECHO), Grenada  
Action Ageing Jamaica  
St. Catherine's Community Development Agency (SADCA), Jamaica  
Old People's Welfare Association (OPWA), Montserrat  
HelpAge St Lucia  
National Foundation for Blind Care, Suriname

### North America

HelpAge Canada  
AARP, USA  
HelpAge USA  
West Virginia University Center on Aging

### Western Europe

Zivot 90, Czech Republic  
DaneAge Association, Denmark  
HelpAge Deutschland  
Age Action Ireland  
Caritas Malta  
Cordaid, Netherlands  
WorldGranny, Netherlands  
Slovene Philanthropy  
HelpAge International España, Spain  
Age UK/HelpAge International UK  
Centre for Policy on Ageing, UK

### East, West and Central Africa

RECEWAPEC, Cameroon  
Ethiopia Elderly and Pensioners National Association (EEPNA)  
HelpAge Ghana  
HelpAge Kenya  
Kenya Society for People with AIDS (KESPA)  
Mauritius Family Planning Association  
Senior Citizens' Council, Mauritius  
Sawaka-Karagwe (SAWAKA), Tanzania  
Sierra Leone Society for the Welfare of the Aged  
Current Evangelism Ministries (CEM), Sierra Leone  
South Sudan Older People's Organisation (SSOPO)

Sudanese Society for the Care of Older People (SSCOP)  
Tanzania Mission to the Poor and Disabled (PADI)  
Uganda Reach the Aged Association (URAA)

### Southern Africa

Maseru Senior Women's Association, Lesotho  
Association of Retired Persons (APOSEMO), Mozambique  
VUKOXA, Mozambique  
Age-in-Action, South Africa  
Elim Hlanganani Society for the Care of the Aged, South Africa  
Muthande Society for the Aged (MUSA), South Africa  
Senior Citizens' Association of Zambia (SCAZ)  
HelpAge Zimbabwe (HAZ)

### Eastern Europe and Central Asia

Mission Armenia  
Resource Center for Elderly (RCE), Kyrgyzstan  
Second Breath (Gerontological Association of Moldova)  
Dobro Delo (Regional Public Foundation of Assistance to Older People), Russia  
Lastavica, Serbia  
Turbota pro Litnix v Ukraini, Ukraine

### Middle East

El-Wedad Society for Community Rehabilitation (WSCR), occupied Palestinian territories

### South Asia

Bangladesh Women's Health Coalition (BWHC)  
Resource Integration Centre (RIC), Bangladesh  
Gramin Vikas Vigyan Samiti (GRAVIS), India  
HelpAge India  
Pakistan Medico International (PMI)  
HelpAge Sri Lanka

### East Asia / Pacific

Council on the Ageing (COTA), Australia  
Office of Seniors' Interests, Australia  
China National Committee on Ageing (CNCA)  
Helping Hand Hong Kong, China  
Instituto de Acção Social, Macau, China  
Fiji Council of Social Services (FCSS)  
Yayasan Emong Lansia (YEL), Indonesia  
HelpAge Korea  
Mongolian Association of Elderly People  
National Council of Senior Citizens Organisations, Malaysia (NACSCOM)  
Yayasan Amal (USIAMAS), Malaysia  
Coalition of Services of the Elderly (COSE), the Philippines  
Singapore Action Group of Elders (SAGE)  
Society for Women's Initiative for Ageing Successfully (WINGS), Singapore  
Tsao Foundation, Singapore  
Foundation for Older Persons' Development (FOPDEV), Thailand  
Senior Citizens' Association of Thailand  
Senior Citizens' Council of Thailand  
Centre for Ageing Support and Community Development (CASCD), Vietnam  
USIAMAS, Malaysia  
Vietnam Association of the Elderly (VAE)

## Our regional offices

**East, West and Central Africa Regional Office:** PO Box 14888, Westlands, 00800 Nairobi, Kenya

Tel: +254 20 4444289/44446991      Fax: +254 20 4441052      [helpage@helpage.co.ke](mailto:helpage@helpage.co.ke)

Programme offices in East, West and Central Africa are also in Ethiopia, DR Congo, Tanzania, and Uganda

**Southern Africa Regional Office:** 1067 Arcadia Street, 2nd Floor, SAQA House, Hatfield, Pretoria, South Africa

Tel: +271 24 307775

A programme office in Southern Africa is also in Mozambique

**East Asia and Pacific Regional Office:** 6 Soi 17, Nimmanhemmin Road, Suthep, Muang, Chang Mai 50200, Thailand

Tel: +66 53 894805      Fax: +66 53 894214      [hai@helpageasia.org](mailto:hai@helpageasia.org)

Programme offices in East Asia are also in Cambodia and Myanmar

**South Asia Regional Office:** #35/D (First Floor) Road #07, Block-G, Banani, Dhaka-1213, Bangladesh

Tel: +880 44 7640 1328      Fax: +880 44 7600 1633      [info@helpagebd.org](mailto:info@helpagebd.org)

Programme offices in South Asia are also in Nepal and Pakistan

**Latin America Regional Office:** Calle Vincenti No. 576, Entre Claudio Pinilla y Luis, Uria de Oliva, Sopocachi, La Paz, Bolivia

Tel: +591 2 241 6830      Fax: +591 2 241 0957      [info@helpagela.org](mailto:info@helpagela.org)

Programme offices in Latin America are also in Colombia and Haiti

**Caribbean Regional Office:** 11 ½ Swallowfield Road, Kingston 5, Jamaica

Tel: +1 876 754 925      Fax: +1 876 754 5781      [helpage@cwjamaica.com](mailto:helpage@cwjamaica.com)

**Eastern Europe and Central Asia Regional Office:** 204 Abdrakahmanova Street, 4th Floor, 720040 Bishkek, Kyrgyzstan

Tel: +996 312 664636      Fax: +996 312 620830      [kyrgyzstan@helpageinternational.org](mailto:kyrgyzstan@helpageinternational.org)

Programme offices in Eastern Europe and Central Asia are also in Moldova and Tajikistan

**Northern Africa and the Middle East:** include country programme offices in Sudan and the occupied Palestinian territories.

HelpAge International  
PO Box 70156  
London  
WC1A 9GB  
UK

3rd Floor, Tavis House  
1-6 Tavistock Square  
London  
WC1H 9NA  
UK

Tel: +44 (0)20 7278 7778  
Fax: +44 (0)20 7387 6992  
info@helpage.org  
www.helpage.org

Copyright © HelpAge International 2012

**Registered charity no. 288180**  
**Company limited by guarantee**  
**Registered in England no. 1762840**

**Sign up for our eNewsletter at: [www.helpage.org/enewsletters](http://www.helpage.org/enewsletters)**