# Executive Summary

This report assesses the successes of HelpAge International’s Age Demands Action Campaign (ADA) over the past five years in terms of policy changes observed, public awareness raised, value for money of the investments made and capacity of older people built. It is based on an extensive review of ADA documents and discussions with in-country partners (country and regional officers, ADA leaders and politicians). Although not specifically requested, the campaign’s achievements against the PPA logframe and HelpAge’s corporate indicators have also been considered.

The ADA Manual describes the Campaign’s four main elements and processes:

* **Older people come together** in groups convened by the HelpAge Global Network partner in the country to discuss older people’s issues that require change, formulate a policy ask and agree a delegation to meet a decision maker.
* **Older people raise awareness** by engaging with the media, recruiting celebrity support and holding marches, exhibitions or events on or around the International Day of Older Persons on 1 October.
* **Older people collect signatures for an international petition** to call for equal rights of older people.
* **A delegation of older people meets decision makers** to call for change on the issues agreed by a larger group of older people and the HelpAge Global Network partner.

The Age Demands Action Campaign has shown some impressive achievements. Not only did it grow from 27 countries in 2007 to 59 participating countries in March 2012.[[1]](#footnote-1) It also mobilised a significant number of older people to campaign for their rights. For example, since 2008, 32,213 people have signed a global petition calling for equal rights for older people and, in 2011, ADA engaged over 62,000 campaigners.[[2]](#footnote-2) It also achieved some significant improvements for older people’s lives. In 18 municipalities or provinces around the world older people achieved changes for the betterment of their lives, for example by being granted discounts and special seating on local transport or through improved health services. Although attribution of policy changes to ADA is difficult, it is extremely likely that the activities of ADA have in many countries contributed to important breakthroughs. 21 countries made progress on Older People Policies, or Policies including older people; 7 countries created National Older People Committees; in 4 countries HelpAge was invited to contribute to Older People Policies; 17 countries made progress on extending coverage of pensions or other social protection policies or are in the process of reviewing these policies; in 11 countries, older people saw improvements in their access to health services; 7 countries implemented improvements to other public services such as transport or housing; and 3 countries investigated older people’s issues with a view to change.

At this stage it is difficult to assess the outcomes and impact of these changes in quantitative terms but it can be assumed that in the medium to long term they will contribute significantly to HelpAge’s objectives of more secure incomes, better access to health services, resilience in the face of humanitarian emergencies, challenging age discrimination and a global network of organisations to improve their work with and for older men and women. As a consequence of ADA, it is estimated that by March 2012, 10,243,850 older people had the potential to benefit from new/improved policies (Corporate Indicator 25). This figure exceeds the HelpAge 2013 Strategy target of 2.6 million older people. However this figure only includes people in 13 out of the 59 countries in which the Campaign is running, even though policy changes in other countries have been described. This suggests that the real figure is substantially above the current 10.2 million and the Campaign is making good progress towards the DFID PPA target of 50 million older people having the potential to benefit from new/improved policies by 2014 (year 3).

Another important element in advancing the objectives of the ADA Campaign is to raise public awareness about older people’s issues. A range of awareness raising activities around the focal day of the Campaign – the International Day of Older Persons on 1st October – have contributed to an estimated 50 million listeners and viewers having heard of the issues at stake in 2011 alone. The total number of media hits in 2011 (including print, digital, radio spots, press conferences and television coverage) more than doubled from 133 in 2010 to 321. Nationally, as well, the figures indicate an increase. For example, in Fiji 25 broadcast and print media items means that up to 80% of the population will have heard about the campaign.

In 2010, ADA published its first global perception survey, called Insights on Ageing, which collected evidence on older people’s experiences. Over 1,250 people over the age of 60 in 33 countries across Africa, Asia, Europe and the Caribbean responded. Alongside this survey, partners provided feedback on their ADA experiences. Results included: 100% of ADA partners enjoyed being part of the campaign; 52% of ADA partners said that the campaign achieved immediate change for older people in their country; 86% of partners said that ADA had built the capacity of older people to lead advocacy work with their governments; 95% of partners said that ADA raised the profile of ageing issues in their country; and 100% of ADA partners would be interested in joining an ADA Campaign Network to campaign globally and locally on key issues relevant to older people.

The capacity building element towards campaign actions on 1st October has probably had the biggest qualitative impact of the campaign as it has built older people’s confidence and self-esteem, including in claiming their rights and entitlements in negotiations with decision makers. All respondents in case study countries were proud to be involved and to feel that at ‘their age’ they could still contribute to society. The Campaign has ‘given them a voice’. Those interviewed had got involved in the campaign for a range of reasons, including as a religious obligation, to help others and as a social activity – as involvement in Campaign activities itself reduces social exclusion and provides opportunities for social interaction. Many of them see involvement as a rare opportunity to do something positive.

The Campaign has proved to be extremely good value for money[[3]](#footnote-3): The 2008-2011 London expenditure per older person with the potential to benefit from new or improved policies is extremely low and very good value for money. Based on data available from 13 countries (a quarter of those involved in the ADA), the cost to HelpAge London has been just €0.12 per older person. In 12 of these countries, the cost was less than 10 Euro-cents per older person, with 7 countries achieving positive policy changes on expenditure of less than 1 Euro-cent per person. Globally, the average cost to HelpAge London per participant is €1.36. Even without considering other costs (e.g. staff costs and costs absorbed by project/overheads) or other factors (evidence on the effectiveness of training, or the effect of participation on individuals), this appears to be a low price in terms of the confidence and other benefits (e.g. opportunities for socialisation) which have anecdotally been achieved by the older people involved. The 2011 London annual ADA expenditure (excluding overheads) was €93,745, averaging €1,838.14 per country.

Although the Campaign has had good successes, the report contains a number of recommendations regarding management issues. Many of the interviewees felt that more could be done in terms of duration and depth of capacity building, as well as refresher sessions. It has been noted that there could be some efficiency gains by organising tasks such as translation centrally. Concerning M&E-processes the campaign needs to plan more carefully in line with HelpAge’s corporate indicators to facilitate better monitoring and evaluation. Reporting mechanisms also need to be aligned with indicators in any future logframe. London tracking of funding should include local and overhead funding for a more complete VfM-analysis in future. The consultants also recommend M&E training for campaigns staff in London and possibly in regional and/or country offices to facilitate future analysis of successes and potential improvements of ADA. It is recognised that these (and other recommendations) would most likely require an increase in resources.

Furthermore, the report recommends the use of a wider variety of campaigning strategies and tactics. The single-track campaign approach of identifying an issue, formulating a policy ask and meeting a decision maker should become more flexible. This requires further capacity building of older people and ADA leaders so that they are not only able to identify a policy change they would like to see but also the best tactic to achieve a goal by analysing influencing routes, for example. This can build more capacity and ownership, and means that the success of the campaign no longer rests completely on being able to access a particular individual decision maker directly.

HelpAge should also integrate the global policy asks better with the country campaigns by mobilising its campaigner base to push for policy changes at the global level. For example, rather than focussing on a rather vague petition ask for equal rights, it could consider collecting signatures towards a defined goal and with a sense of urgency. It has also been suggested that there could be discussions at local level, with ideas brought up to regional and then national levels – with ADA delegates participating in each level. This makes sense if resources are available. It could be worth having a discussion in each country about the best way to do this. For example, some existing community, regional and national meetings already take place which could be used as an opportunity to discuss older persons’ issues, rather than inventing parallel structures (which would be more expensive). ADA delegations could, for example, get involved in regional development partners’ meetings and national thematic meetings on social protection, pension, HIV/AIDS, etc, depending on the priorities of that ADA delegation.

This would also tie in with the consultants’ recommendations on improved sharing of experience among countries. There was great appetite among campaigners for more face-to-face meetings to exchange experience and strategies. This could not only fulfil capacity building aims but also widen the available toolkit of campaigning strategies. It should be built into future funding proposals. Capacity building should in fact be considered as a major focus of the campaign in the next few years. “With more resources to cover trainees’ expenses, a better training could be done with longer durations of the basic training and more rehearsal sessions”, noted one interviewee. If older people are to be able to ‘negotiate with decision-makers, strategise and leverage support from media/influential individuals’, this area needs significant improvement.

Many countries interviewed felt that an increase in activities throughout the year – and leading up to October 1st – would be beneficial, in terms of momentum, keeping people involved, raising awareness and hence having more impact. In a number of countries, this has already occurred, with the campaign developing from a one off event in October, to an ongoing process. In 2012, there is also a campaign on “Age Demands Action on Health” around World Health Day on 7th April and ADA for Rights on World Elder Abuse Awareness Day on 15 June.

To sum up, there have been many successes: older people have learned to plan a campaign and raise respect for themselves and awareness around older people’s issues; they have been involved in decision making around the issue area to be addressed and thus helped ADA reflect local environments; they were successful in involving national, provincial and local governments; and resources have been spent effectively. HelpAge should be congratulated on all these.

1. Corporate Indicator 22 Q1, Strategy target of 60 countries by March 2013, and a PPA target of 65 countries by 2014. [↑](#footnote-ref-1)
2. Corporate Indicator 22 Q2, Strategy target of 65,000 people by March 2013. [↑](#footnote-ref-2)
3. For caveats and calculations see Section 4.3 and Annex 8. [↑](#footnote-ref-3)