



COVID-19: Everyone matters

April 2020

The evidence is clear that people in older age are among those most at risk of complications from COVID-19¹. As we grow older our lives do not become disposable. Older people are us. They are members of our families, our caregivers, our workers and neighbours.

This pandemic affects all of us but will have the greatest impact on those already experiencing poverty, poor health and discrimination. We can only suppress the spread of the virus and minimise its impact on our lives if we work together across communities, organisations and countries.

We call on governments, donors and agencies to recognise the heightened risk that older people face to their dignity and wellbeing in this pandemic, listen to their voices, and ensure they have equal access to prevention measures, support and services in all settings. Governments and agencies need to ensure that we all know what actions we can take to protect ourselves, each other, and those most at risk. **Everyone matters**.

Recommendations

- 1. Uphold the principles of equality and non-discrimination
- 2. Make public health information accessible and relevant to all
- 3. Ensure equitable access to prevention and support in all settings
- 4. Provide equitable access to social protection and services
- 5. Recognise the risk to older people in conflict and displacement settings
- and provide support regardless of legal status
- 6. Explicitly allocate funding to those most at risk in all settings
- 7. Stand in solidarity with the international community
- 8. Build a fairer future for older people

1. Uphold the principles of equality and nondiscrimination

Responses to the COVID-19 pandemic must be in line with international human rights standards and principles that apply to everyone, everywhere.

This means governments must uphold older people's right to health, including their access to healthcare, medical services and information on an equal basis with others and without discrimination. As demand on health services increases, everyone must be guaranteed equal access to the life-saving treatment they need. Governments and the World Health Organization (WHO) should develop 'triage' protocols on the allocation of scarce medical resources. These protocols must be based on clinical assessment, medical need, scientific evidence and ethical principles, and not on non-medical characteristics such as age or disability.

Emergency measures that governments introduce to slow down or contain the spread of the virus must be temporary, necessary, proportionate and should not discriminate based on age or any other characteristic, such as gender or disability. Isolation policies that place greater restrictions on older people based on their age are discriminatory. Restrictions on other rights, such as access to care and support services or to social protection measures will have a disproportionate impact on older people who are already marginalised or isolated, have specific support needs, who are homeless or have a disability.

2. Make public health information accessible and relevant to all

Regular communication with the public is one of the most important steps to save lives and minimise adverse outcomes. It is essential that information about how COVID-19 is transmitted and treated, and what we can do to prevent infection for ourselves and others, is made accessible and relevant to all.

Public health communications need to identify who is at risk of being missed or excluded, including older people, who may have lower literacy levels, speak only local languages or have a disability. They may also live in remote areas, informal settlements or camps for displaced people that make them even harder to reach. Older people have the right to access information to make informed choices about their own health and have peace of mind. Older men and women often play a key role in their families and neighbourhoods and can help disseminate information, as well as actively contribute to finding solutions and taking action to protect themselves and their communities.

National authorities and others must produce regular, transparent, and accurate updates on the situation and justifications for their response measures. This includes age, sex and disability disaggregated data on the number of cases and deaths. Differences in transmission and outcome between older women and men should be analysed to inform the design of preventative measures and responses.

Whilst older people are among those most at risk of complications from COVID-19, this is not an 'older person's disease'. Misinformation fuels the stigma and discrimination that many older people already face. Everybody is at risk of being impacted by COVID-19, and everyone can help stop transmission.

"Many older people are very scared by the reports of many deaths from other countries. This causes panic. People over 80 are especially worried. The most important thing is to reassure people which I try to do. I tell them: 'we have experienced so much in our life; we will survive this too'."

Older woman, Kyrgyzstan

3. Ensure equitable access to prevention and support in all settings

Governments must be supported to implement a full package of measures in line with WHO guidance to suppress COVID-19 transmission and to ensure no one is left behind. Specific measures to support older people in all settings must be implemented by governments and humanitarian agencies during an outbreak.

The views and experiences of older people themselves need to be heard in the planning and implementation of responses to COVID-19. Older people who are living alone or isolating alone must be enabled to stay in touch with family and friends. Systems should be put in place to ensure older people can continue to access care and support if needed, and essential supplies, including food, clean water, and medicines. Care and support workers must have adequate personal protection equipment and clear guidance on how to protect themselves and the older people they support.

Regular handwashing, physical distancing and covering our mouths and nose when we cough or sneeze, are key measures to reduce COVID-19 transmission. However, handwashing and physical distancing are easier for some to implement than others. Many people, including older people, live without access to basic handwashing and sanitation facilities. Homeless older people should be adequately housed immediately. Physical distancing is sometimes impossible for those who live near one another, such as in densely populated informal settlements. This makes it imperative for governments to follow the WHO's advice to isolate, test, treat and trace cases of COVID-19².

4. Provide equitable access to social protection and services

As a result of this pandemic, older people's incomes and living standards could decline significantly, putting them at high risk of financial difficulties. Governments must continue to pay pensions and expand pension systems so that all older people have a secure income.

Older people may rely on multiple income sources including paid work, savings, financial support from families and pensions. However, some of these income sources may be low and irregular and many older people do not have access to a pension. Older women are less likely to have a pension, often have less savings and own fewer assets.

Women of all ages do a disproportionate amount of unpaid care work, which can put them at higher risk of infection. Older women often care for family and community members, doing twice as much unpaid care as older men, which can increase in emergencies³. Responses should be rooted in gender analysis, to assess the impact of proposed measures on women of all ages and ensure they have equal access to prevention and support.

Older men and particularly older women face an increased risk of domestic violence - including physical, psychological, financial and sexual abuse - during the implementation of physical distancing measures. There is evidence to suggest that domestic violence has increased since the outbreak began⁴. During this pandemic and in the future, older people must be able to report incidences safely and access services. Governments and policy makers are required to ensure services to address violence and abuse are considered essential and included in preparedness and response plans for COVID-19, including alternatives to make them accessible during periods of isolation.

"The last time the older people were paid their stipend was in January when they got the November and December payment. Right now, they have no money to pay rent let alone afford to stock up necessities should the ban on gathering and walking about be prolonged."

Older woman, Kenya

"Older care givers like me, must be provided with some specific assistance. I am the main source of income for my family and they rely on me, but now I do not have a steady income."

Older man, Jordan

5. Recognise the risk to older people in conflict and displacement settings and provide support regardless of legal status

The heightened risk to older people's wellbeing and dignity in humanitarian situations must be recognised and responded to by humanitarian agencies and governments.

Older people in conflict and displacement settings face longstanding barriers to accessing humanitarian assistance, which are exacerbated in the face of COVID-19 and further increase their risk. This includes barriers to accessing information, health services, and water and sanitation facilities, as well as age discrimination in the allocation of scarce resources. They face higher risk of complications from infection in a setting where the virus could rapidly spread and where health centres are not equipped to respond.

Governments and humanitarian agencies must respond to older people's increased risk, including consulting older people about the best measures to meet their needs. They need to make efforts to ensure that water and sanitation facilities are easily accessed, and that accurate information is timely delivered in an accessible way. Older people living in camp settings must be able to access health services provided by the national health system, regardless of legal status.

The UN Global Humanitarian Response Plan⁵ for COVID-19 is welcome but fails to adequately recognise and provide an effective response to the multiple challenges older people face. Older people must be identified among those most affected and at risk, and expressly targeted in responses if humanitarians are to fulfil their mandate and save lives.

6. Explicitly allocate funding to those most at risk in all settings

Older people have always been overlooked in development and humanitarian strategy development and funding. It is time for this to change.

The risk posed to older people's dignity and wellbeing by COVID-19 means they need to be explicitly identified and considered in funding applications and decisions at all levels and in all settings. Funding must be made available to stakeholders with the right expertise, including local communities and organisations, to ensure responses meet the needs of those most at risk and most affected. Funding should address health needs and the social and economic impacts of the virus both in the response and recovery stages.

7. Stand in solidarity with the international community

The impact of COVID-19 will be greatest in low-and-middle-income countries, where healthcare systems may be fragile, prevention measures are harder to implement, and older people may have little or no access to social protection. High income countries must share resources to strengthen healthcare systems, scale up social protection schemes and support the economic recovery of lower-and-middle-income countries.

They should also share best practice in their experience responding to this pandemic and data to accelerate global research to develop diagnostics, medicines and vaccines. COVID-19 does not respect borders, so countries must work together to combat it. We need a multi-lateral response and greater leadership from international bodies, like the UN and WHO, that fully recognises and addresses the heightened risks older people face from COVID-19, especially in lower-and-middle income countries. Countries must invest resources to prevent infection and provide the best possible treatment for those who do become ill.

"I don't know anything about that virus, just people are saying something about a virus on the megaphone, but I don't hear well, that's why I don't know anything... I'm always thinking, what are they saying on the microphone?"

Older woman, Rohingya refugee camp

"This phase made me appreciate the small things, what really matters and who really cared about me. It also reminded me of my hobbies, I sewed, I read, I took care of my house in different ways. It also strengthened our relationships with the family members and revived old relationships."

Older woman, Lebanon

8. Build a fairer future for older people

Many of us will have had life-changing experiences or suffered unimaginable loss during the pandemic. But we will have a chance to change the world for the better.

Our experiences of COVID-19 illustrate the importance of implementing the Sustainable Development Goals to build resilient and equitable systems and societies for everyone, including older people.

We must invest in public health systems as a part of building global health security and strengthen universal health coverage to ensure better health and wellbeing for all people everywhere. It is a chance to introduce and strengthen social protections systems, including universal pensions, that guarantee an adequate income for all people as they grow older.

This pandemic has exposed how unequal our world is. We must ensure everyone's right to equality and non-discrimination is upheld now and in the future.

Further resources and guidance

- HelpAge International COVID-19 hub www.helpage.org/coronavirus-covid19
- Advice on administering pensions, HelpAge International www.helpage.org/what-we-do/how-to-administer-pension-payments-during-the-covid19-pandemic
- Guidance on collecting pensions, HelpAge International www.helpage.org/what-we-do/how-older-people-can-safely-collect-pension-payments-during-the-covid19pandemic
- Guidelines for care homes, HelpAge International
 www.helpage.org/what-we-do/guidelines-for-care-homes-for-older-people-in-the-context-of-coronavirus covid19
- Advice for older people, HelpAge International www.helpage.org/download/5e809c5620653
- Advice for communities and older people's associations, HelpAge International www.helpage.org/what-we-do/covid19-guidance-and-advice-for-communities-and-older-peoplesassociations
- Older people and COVID-19 in informal settlements, HelpAge International www.helpage.org/cities
- "Unacceptable" UN expert urges better protection of older persons facing the highest risk of the COVID-19 pandemic, OHCHR

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

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 $^{\scriptscriptstyle 1}$ Jordan R et al., 'COVID-19: risk factors for severe disease and death', The BMJ, 2020

Fai Zhou MD et al., 'Clinical course and risk factors for mortality of adult inpatients with COVID-19 in Wuhan, China: a retrospective cohort study', The Lancet, 2020

² World Economic Forum, *WHO coronavirus briefing: Isolation, testing and tracing comprise the 'backbone' of response,* https://www.weforum.org/agenda/2020/03/testing-tracing-backbone-who-coronavirus-wednesdays-briefing/ (15 Apr 2020)

³ Overseas Development Institute, Between work and care, https://www.odi.org/sites/odi.org.uk/files/resource-documents/12509.pdf (15 Apr 2020)

⁴ United Nations, *UN chief calls for domestic violence 'ceasefire' amid 'horrifying global surge'*, https://news.un.org/en/story/2020/04/1061052, (15 Apr 2020)

⁵ United Nations, *Press Release COVID-19 Global Humanitarian Response Plan*, https://www.unicef.org/rosa/media/6171/file/PRESS%20RELEASE%20COVID-19%20Global%20Humanitarian%20Response%20Plan.pdf.pdf, (15 Apr 2020)