

# Unequal treatment

HelpAge

International

*What older people say about their rights during the COVID-19 pandemic*

## Country profile: Kenya



Older people's health and lives have been at particular risk from COVID-19. Their rights have also been denied. In October 2020, a consultation was carried out to better understand older people's experience of their rights during the pandemic.

This summary explores themes emerging from the responses. It presents the individual voices of the older people interviewed – voices that, despite the disproportionate impact of COVID-19 on older people, have rarely been heard in discussions on the pandemic. It does not represent the views or experiences of all older people.

Kenya is one of ten countries in which the consultation was carried out. A full report from all ten countries is available at [www.helpage.org/Unequal\\_Treatment\\_report](http://www.helpage.org/Unequal_Treatment_report)

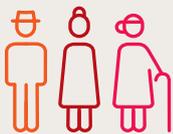
### Details of participants in Kenya



4 women  
6 men



5 from rural areas  
5 from urban areas



2 aged 50–59  
2 aged 60–69  
4 aged 70–79  
1 aged 80–89  
1 aged 90–99



Total number of participants

## 1. Responses discriminating on the basis of age

The government introduced a general population curfew and restrictions on travel. There were no specific restrictions for older people.

Participants who were working said that restrictions imposed to curb the spread of the virus had resulted in a reduction in their income and loss of business.

*“I’m unable to plan for my utilities as income from the business has become unreliable. There are days when I spend money but get no returns because I’m forced to sell at cost price.”*

**58-year-old businesswoman selling poultry products, living with her grandchildren in an urban area**

One person had fallen into debt.

**“I can’t pay my rent anymore. We have three months’ rent arrears.”**

**70-year-old man working in the informal sector, living alone in an urban area**

Another participant said she had found herself increasingly dependent on others to survive.

**“My dependency has increased. I’m living with my grandchildren. They used to go to school but they’re now forced to be with me throughout [the day]. I have to borrow for them to have a meal.”**

**81-year-old woman living with her grandchildren in a rural area**

For others, the loss of family and social connections had had a negative impact on them.

**“I’ve become lonely. My grandchildren no longer visit as often as before, and I’m also unable to travel often to socialise.”**

**64-year-old man, casual labourer, living alone in an urban area**

Some said they had experienced interruptions to healthcare and a deterioration in their health as a result.

**“My health has deteriorated. My children can’t easily travel home to take me to the hospital when I fall sick. It also takes a long time to get medication as movement between the village and urban centres is restricted.”**

**73-year-old woman living with her grandchildren in a rural area**

For one participant, there had been a positive change, as she had been able to build her digital skills.

**“My mindset has changed. I no longer believe that tech is a reserve for the young as we have learnt to use it easily.”**

**58-year-old woman living alone in a rural area**

## **2. Services failing to reach everyone**

The pandemic has exposed the inadequacy of many services, as well as the inequality of access to services among older people and the discrimination they can be subjected to.

Nearly all those interviewed said they had limited or no access to services.

**“We do not have access to any services.”**

**81-year-old woman living with her grandchildren in a rural area**

One exception was an essential worker, who had access to services because of her role.

**“I’m able to access services, being an essential service provider.”**

**58-year-old woman, community health worker living alone in a rural area**

The cost of accessing services was a major barrier for some participants.

**“I have no finances to access basic services any longer.”**

**70-year-old man working in the informal sector, living alone in an urban area**

For one participant, the main barrier was fear.

**“I avoid going to seek services for fear of contracting the virus.”**

**58-year-old woman living with her grandchildren in a rural area**

### **Similar findings in earlier study**

The findings of a rapid needs assessment carried out with 170 older people in Nairobi in July 2020 supports what the older people in this consultation said about the impact of the pandemic on their livelihoods and access to services:

- 62 per cent said they had at least one health condition, yet 23 per cent said they had been unable to obtain medication since the COVID-19 outbreak had begun, rising to 28 per cent of those living alone.
- 62 per cent had had difficulty obtaining food, particularly those with disabilities (66 per cent) and those aged 70 and above (67 per cent).
- 54 per cent of those aged above 70 said that pensions or other cash transfers were their main source of income. They said there had been a delay in payment of pensions until July 2020, when six-month pension arrears were paid.

To read the full report, go to [www.helpage.org/what-we-do/coronavirus-covid19/covid19-rapid-needs-assessment-rnas](http://www.helpage.org/what-we-do/coronavirus-covid19/covid19-rapid-needs-assessment-rnas)

### 3. Gaps in understanding rights

Older people understand their rights in different ways. They have varying levels of knowledge of their rights, with some having significant gaps.

Only two of the older people interviewed said they knew what their rights were.

“I have full knowledge of my rights as a Kenyan citizen.”

**58-year-old woman living with her grandchildren in an urban area**

The majority of participants were unaware of their rights.

“I hear people talking about my rights but I don’t know what they’re referring to.”

**65-year-old man living alone in an urban area**

### 4. Changes older people would like to see

Older people identified a number of changes they would like to see to the response to the pandemic that would better protect their rights and improve their lives.

Participants made a number of suggestions for improving public health responses. These included mitigating the impact of restrictions on movement by informing people about their introduction in advance and allowing organisations to continue to provide essential support.

“[The government should] lift restrictions to allow charitable organisations to continue supporting older people’s wellbeing.”

**96-year-old man living alone in a rural area**

Some felt that more needed to be done to ensure services reached older people.

“Access to pandemic aid, responses and interventions should reach all people, including older persons.”

**71-year-old man living with his children in an urban area**

“Health workers need to come to the villages instead of us travelling long hours to get to the urban centres.”

**73-year-old woman living with her grandchildren in a rural area**

Others felt that support should be put in place to maintain older people’s businesses.

“The government should provide aid or small loans to older people running businesses.”

**58-year-old woman living with her grandchildren in an urban area**

“Older people should be allowed to continue operating when restrictions are put in place, as we depend only on what we have, compared with young people who can adapt and do other things.”

**65-year-old man, mechanic living alone in an urban area**

Some participants felt that improving older people’s use of technology would enable them to access the information they needed. One felt that more use of technology would improve service delivery.

“Government services need to be automated so that we can access them from the comfort of our homes.”

**58-year-old woman living alone in a rural area**

One person felt that decision-makers should consult older people and their representatives more, including those who were not in a privileged position.

“[It would be good to] have an older persons’ representative to talk to decision makers about how older people can get direct help. The government should reach out to older people at the grassroots and not just to the more privileged members of society. Our elected leaders should be accessible to everyone during a pandemic.”

**64-year-old man living alone in an urban area**

## What a convention would do

A UN convention on the rights of older people would:

1. **Be a solid base for a fairer society.** It would help ensure that all older people everywhere are treated in a fairer and more just way.
2. **Result in better services for all.** It would help ensure that governments, the private sector and others design and deliver services that respect older people's rights.
3. **Be a clear guide.** It would be the go-to place to get guidance on what older people's rights are and how to respect them.
4. **Be a driver for change.** It would set in motion a chain of events that would improve older people's lives.

## How the consultation was conducted

The consultation was carried out in October 2020 with four women and six men over the age of 50. Due to COVID-19 public health restrictions, individual interviews were done by phone and WhatsApp using non-probability sampling based on convenience and who was accessible to those carrying out the consultation.

The consultation questions were broad to allow respondents to talk about what was important to them. Questions focused on changes in their lives due to the pandemic, their experience of service delivery, knowledge of their rights, rights guaranteed in law and things they would like the government to do differently.

The findings are intended to capture the views of the ten older people interviewed and are not intended to be representative of the population of older people as a whole.

## Acknowledgements

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**www.helpage.org**

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