The rights of older persons

A review of national ageing strategies in the Arab region







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

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Preface

The International Conference on Population and Development (ICPD) put people's rights at the heart of development and emphasized that empowering people by adequate legislative infrastructure is key to ensuring the well-being of individuals, families, nations and people at large. It also called on States to ensure the full implementation of policies and strategies furthering the progressive achievement of human rights principles. Further, the 2030 Sustainable Development Agenda enforced the principle of "Leaving No One Behind" and measurement of the development progress through specific indicators that require age and sex disaggregated data to make for the inclusiveness of youth, women of all ages and older people.

The Arab Plan of Action on Ageing (APAA2002) and the Madrid International Plan of Action on Ageing (MIPAA2002) and the Arab Regional Ageing Strategy (ARAS2019-2029) prompted Arab states to develop and implement national strategies and policies targeting the wellbeing of old people. In this context, UNFPA Arab States Regional Office (ASRO), has commissioned this assessment, in coordination with HelpAge International to promote and protect the rights of older people. Six national ageing strategies and specific age-related policies for six selected countries and national constitutions have been reviewed for criteria that examine their alignment with the rights approach.

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The analysis of these strategies found that there is much that, if implemented fully, would advance older persons' enjoyment of their rights. However, there are significant gaps. While they address some elements of the rights covered, they do not address all of them. Another gap is the range of rights that are included, which is currently limited to social, economic, and cultural rights, and does not fully address every aspect of those. There is inadequate attention to civil and political rights, including fundamental rights such as the right to equality and non-discrimination, autonomy, and access to justice.

This assessment encourages Arab countries both to establish national ageing strategies, if not yet done, and update those that do exist and make them easily accessible to the public.

We also hope that the conclusions drawn from this analysis will provide policymakers in all countries in the region with a knowledge tool to advance the implementation of the International Conference of Population and Development Programme of Action, and to ensure that the needs of different population groups are equitably addressed.

We would like to thank Bridget Sleap for analyzing the ageing strategies and writing this report and to Lina Alqurah for coordinating and contributing to this report. We extend our thanks to Hala Youssef, Chokri Benyahia and Ghada Diab for their guidance throughout the whole process and thorough review of the tool.

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The rights of older persons: A review of national ageing strategies in the Arab region

Executive summary

The rights of older persons have come under the spotlight during the COVID-19 pandemic. As the UN Secretary General pointed out, the pandemic 'presents a disproportionate threat to the health, lives, rights and well-being of older persons'.¹ However, concern about the rights of older persons had been growing significantly in the decade before COVID-19. A UN working group, a UN independent expert and two regional human rights instruments all dedicated to the rights of older persons were established between 2010 and 2019, with a commitment for a third regional instrument in the Arab region.

The creation and subsequent work of these human rights mechanisms on the rights of older persons have provided us with a deeper understanding of how human rights apply in older age. Reviews of the International Conference on Population Development (ICPD) and the Madrid International Plan of Action on Ageing (MIPAA) in the last decade have also added to our understanding of the rights of older persons. However, this understanding can only benefit older persons if it is put into practice. One way to do that is by incorporating it into the development of national laws, policies, strategies and plans.

This review assesses the extent to which national ageing strategies in six Arab countries: Egypt, Jordan, Saudi Arabia, Syria, Tunisia, and the United Arab Emirates, are in line with human rights principles and standards. What we have found is that there is much in the strategies that, if implemented fully, would advance older persons' enjoyment of their rights. Making public transport and the environments older persons live in more accessible, for example, would help realise their right to fully participate in society. Access to literacy training, adult education and other skills-building opportunities would support the realisation of their right to education and lifelong learning.

However, there are significant gaps in the strategies. While they address some elements of the rights covered, they do not address all of them. Access to palliative care, for example, is not included under measures on health. There are no measures to ensure older persons exercise their right to autonomy over their care and support services. Another gap is the range of rights covered. Human rights are interdependent and indivisible and although the strategies focus on social, economic and cultural rights, there is little attention on civil and political rights.

There are no measures to ensure older persons' equality and non-discrimination, autonomy and access to justice, all of which are central to our dignity at any age. This limited focus perpetuates an understanding of our lives in older age as confined to social and cultural life with some engagement in economic activity, rather than a continued life as full members of society in all its aspects, including civil and political life. There is limited attention to the intersectional and cumulative discrimination older women can face on the basis of their age and gender. Although human rights apply in conflict and humanitarian settings as well as in peacetime, older persons' rights within conflict and humanitarian settings are only addressed in two of the six strategies.

These gaps are expected as perhaps, unsurprisingly, there is no comprehensive guide available on the rights of older persons on which these states can draw strategies. Instead, the rights of older persons are fragmented and dispersed throughout existing international human rights instruments. International and regional ageing strategies fail to adequately address all human rights in older age. This review clearly demonstrates the need for such a guide, in the form of a UN convention on the rights of older persons.

It is only when older persons enjoy the full range of their rights that they will be able to live dignified, autonomous and independent lives as full members of society. National ageing strategies have an important role to play in this, but only if they too address the full range, and all the elements of, older persons' rights.

1. Introduction

Ageing in the Arab region

The number of older persons is rising at a fast rate in the Arab region. According to the Population Division of the United Nations, the population age over 60 years old will roughly double in 15 years, increasing from 27 million in 2015 to 50 million in 2030, reaching more than 80 million by 2045.²

Older people are more likely to be part of the lowest income and least educated groups of the population in the Arab region.³ In most Arab countries, older persons continue to work as an economic necessity where social and economic security systems are relatively weaker. It is estimated that social security coverage extends to less than 25 per cent of the population in the Arab region.⁴ Pension coverage is typically lower among women than among men owing to their lower rates of attachment to the labour market, their over-representation in the informal sector or their work as self-employed or unpaid family workers.⁵ Thirty six per cent of older men are working compared to five per cent of older women.⁶

According to the results of surveys conducted by the Pan Arab Project for Family Health (PAPFAM) in a number of Arab countries, 85 per cent of the population age over 60 years old reported being the head of their household (63 per cent) or the spouse of the head (22 per cent). Among older men, 94 per cent are the head of household compared to 30 per cent of older women. The financial strain of having economic responsibility for other household members can put older persons more at risk, especially in situations where they forego their own health care in order to meet other household expenses.⁷

Programmes targeting the health of older persons including screening programmes for noncommunicable diseases (NCDs) are widespread in the Arab countries, paying attention to early detection and treatment of NCDs and awareness-raising campaigns. However, mental health and nutrition are often underrepresented in policies and programmes for older persons. Workforce trained in the care of older persons, including geriatricians, gerontologists and social workers, is largely lacking. Arab states list several hurdles to providing adequate health care for older persons. These include a lack of political will and legislation, lack of human and financial resources, the absence of guidelines for care homes in many countries and the rising cost of medical and health-care services. The absence of universal health coverage remains the main concern and most pressing barrier to the wellbeing of older persons.8 Abuse, neglect and maltreatment of older persons is reported to be on the rise, resulting in violence, including gender and sexual violence. Illness among the older population is rising, with a relatively high prevalence of chronic illnesses of around 41 percent.9

The Arab Plan of Action on Ageing (2002) and the Madrid International Plan of Action on Ageing (2002) have prompted Arab states to draw up national strategies and policy guidelines. Many Arab countries have completed this exercise. However, many of these strategies are most likely outdated and not easily accessible to the public. Most countries rank low financial resources as either the primary or secondary challenge to implementation of these strategies, closely followed by weak ministerial coordination and lack of human resources. 11

Additionally, there is a gap between the existence of policies and the reach and scope of programmes on the ground which may hamper advancing the older persons' agenda. Reported implementation challenges include a lack of political will and social awareness of population ageing, lack of up-to-date data and evidence and limited access to resources when ageing is not prioritized in national agendas.¹²

The impact of COVID-19 in the region

The COVID-19 pandemic has severely impacted the already over-stretched health systems of low- and middle-income countries, including many Arab countries. As of October 2020, the Arab region reported a relatively lower share in the disease burden than other regions, but the outbreak is accelerating.¹³ In the Arab region, poverty significantly contributes to the poor health of older people. Limited availability of well-trained health personnel, the struggle to achieve universal health coverage and the financial burden of COVID-19 could result in prioritising younger age groups for life-saving health measures over the health needs of older people.¹⁴ Women and girls have been disproportionately impacted by the pandemic, which has exacerbated pre-existing inequalities and had alarming health and economic impacts for women and increased reports of gender-based violence. Violence against older persons, particularly older women is likely to be further aggravated by stress and fear, making them even more vulnerable in the absence of necessary support and services. Many Arab countries are already made vulnerable and fragile by conflict and humanitarian crises, in which older persons are particularly at risk of the worst impacts of the virus, because of overcrowding, under-resourced services, and lack of access to national health services.¹⁵

Additional and more disaggregated data and information are crucial to understanding which groups are most at risk of COVID-19, and to inform who is most in need of enhanced access to social protection and to mobile and virtual health, education and financial services, particularly during enforced physical distancing and/or isolation. This data is important to



understand the different burden and impact of COVID-19 on women and men among older age groups as well as address shortcomings and specific vulnerabilities and risks such as mental health disorders because of ageing or domestic violence.¹⁶

In its report on ageing and COVID-19, the UNFPA Arab States Regional Office made a number of recommendations to governments on addressing the pandemic including¹⁷:

- Using the Arab Regional Strategy for Older People Health to guide policies to support older population groups.
- Adopting schemes to eradicate poverty in older age, particularly of older women and those in rural areas.
- Adhering to rights-based approaches in planning for the social security and health care needs of older persons.
- Encouraging older persons' participation in decision making at all levels
- Developing opportunities for older persons to remain in or to enter the labour force.
- Providing guidance on policy including the roles of parliamentarians in COVID-19 to amend laws and policies addressing the older population, the need to strengthen monitoring and evaluation of strategies and plans, and to raise public awareness.
- Including contingency planning for refugee and IDPs where necessary, and making provisions for older people to access appropriate treatment regardless of their legal status in national preparedness plans
- Ensuring older persons in humanitarian settings have access to social and legal services to enhance their autonomy, protection, and care as well as all other rights as applicable, including pensions, welfare benefits, and compensation for loss of property.

Human rights in older age

The human rights of older persons are increasingly under the spotlight.

The COVID-19 pandemic has exacerbated existing inequalities and discrimination older persons experience and, as the UN Secretary General pointed out, 'presents a disproportionate threat to the health, lives, rights and well-being of older persons'. The disproportionate impact on older persons' physical health was not the only way the virus impacted on older persons. As the Secretary General pointed out, older persons also faced particular threats to their human rights, including the denial of health care for conditions unrelated to COVID-19, neglect and abuse in institutions and care facilities, an increase in poverty and unemployment, and the trauma of stigma and discrimination. The secretary General pointed out, older persons also faced particular threats to their human rights, including the denial of health care for conditions unrelated to COVID-19, neglect and abuse in institutions and care facilities, an increase in poverty and unemployment, and the trauma of stigma and discrimination.

The failure to protect the rights of older people in the response to the pandemic has led to unnecessary deaths, deterioration of cognitive, mental and physical health, unmet health and other support needs, increased poverty, discrimination, abuse, vilification and stigmatisation. Quarantine measures have discriminated against older persons on the basis of their age. Age has been used to deny their right to equal access to scarce medical resources. Access to their livelihoods, care and support, pensions and treatment for other health conditions has been denied. The abandonment and neglect of older residents in care homes, the refusal to admit them to hospital, the placing of 'do not resuscitate orders' in care plans without consent or with undue influence, and the return of residents from hospital without COVID-19 testing have all implicated their human rights to life and in many cases resulted in catastrophic numbers of preventable deaths.20

However, concern about the rights of older persons had been growing significantly in the decade before the COVID-19 pandemic. In 2010 a UN working group, the UN Open-ended Working Group on Ageing for the purpose of strengthening the protection of the human rights of older persons (hereafter the UN Open-ended Working Group on Ageing), was established by the UN General Assembly to identify possible gaps in the existing international human rights framework in relation to older persons and how best to address them.²¹ In 2013 the Human Rights Council created a new Independent Expert on the enjoyment of all human rights by older persons.²² Two new regional human rights treaties were adopted, the first ever dedicated solely to the rights of older persons: the Inter-American Convention on Protecting the Human Rights of Older Persons in 2015 and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Older Persons in Africa in 2016.

Reviews of international frameworks during the last ten years have also shown a growing concern for the rights of older persons. The 25-year review of the International Conference on Population Development in Nairobi in 2019 recognized that 'comprehensive policies should underpin the rights of older persons and prepare for an ageing world'.²³ The second review and appraisal of the Madrid International Plan of Action on

Ageing (MIPAA) in 2012 highlighted human rights concerns across every region²⁴ and the third review and appraisal in 2017 noted the growing attention states were paying to older persons' rights.²⁵ At the regional level, the issues older persons face that were highlighted in 2017 UNESCWA review of MIPAA were picked up in the report on the 2018 review of implementation of the 2013 Cairo Declaration.²⁶ Further concern about the rights of older persons was demonstrated in the commitment to adopt a regional convention on their rights within the Arab Regional Strategy on Ageing 2019-2029.

As a result of these developments and the work of the human rights bodies over the last decade, our understanding of how human rights apply in older age has significantly increased. There has been growing attention to the intersectional and cumulative discrimination older women face on the basis of their older age and gender. This review draws on this expanded understanding to assess the extent to which ageing strategies [hereafter national strategies] of selected countries in the Arab League take a human rights perspective. It is hoped the conclusions drawn will inform the development of future laws, policies and strategies to ensure they further the full enjoyment of all human rights by older persons.



I INEDA Caria

2. Methodology

UNFPA and HelpAge International decided to work in collaboration to assess the extent to which a human rights perspective is taken in different national ageing policies, strategies and programmes among Arab countries. Recent assessments have been conducted of national ageing strategies' alignment to the Sustainable Development Goals, International Conference on Population Development and the Madrid International Plan of Action on Ageing. 2728 It was felt a focus on human rights in this assessment would complement and add value to what already exists and serve as a model which could be replicated in other countries in the region. It was agreed to analyze national ageing strategies and/or specific age-related policies for six selected countries. Additionally, it was decided to review national constitutions to see if age is explicitly recognised as a prohibited ground for discrimination.

To begin with, an initial desk review was conducted to identify and access six national ageing strategies.

National strategies listed in the Arab Regional Strategy on Ageing 2019-2029 were prioritised.

In order to review a broad range of countries, the following criteria were established against which to select the countries:

- Geographical representation to include countries from North Africa, the Gulf and the Middle East
- Classification of countries based on income, to include low-, middle- and high-income countries
- Availability of a national ageing policy, strategy or plan of action
- Pace of ageing within the country to include low, moderate and rapid
- Emergency context to include countries experiencing conflict and wars and /or hosting a high number of refugees and /or having a high number of internally displaced persons (IDPs).

Based on these criteria and the availability of national strategies to review, the following were selected:

Table 1:	Country sele	ection			
Country	Geographic region	Income	Pace of ageing	Emergency context	National strategies ²⁹
Egypt	North Africa	Middle	Moderate	-	National Care for Older Persons in Egypt Strategy and Action Plan Until 2015, 2007
Jordan	Middle East	Middle	Moderate	Host to refugees	National Strategy for Senior Citizens 2018-2022, towards a society for all ages, National Council for Family Affairs
Saudi Arabia	Gulf	High	Moderate	-	The National Strategy for the Health of Older Persons in the Kingdom of Saudi Arabia 2010-2015, Ministry of Health
Syria	Middle East	Low	Moderate	Conflict; IDPs	General Directions of the National Strategy for Older Persons' Care in the Syrian Arab Republic 2014-2020, 2014, Syrian Commission for Family and Population Affairs, Population Directorate
Tunisia	North Africa	Middle	Rapid	-	10 Years Plan for Elderly 2003–2012, 2004, Ministry of Social Affairs and Solidarity
United Arab Emirates	Gulf	High	Rapid	-	On the Rights of Senior Emiratis, Federal Law No. 9, 2019

As the table above shows, while Egypt, Jordan, Syria and Tunisia have national ageing strategies that we can review, the Saudi Arabia strategy focuses on health and the United Arab Emirates has a law on rights of senior Emiratis. This has the advantage of allowing us to look at the different types of frameworks in place, but it also limits any direct comparison between them.

The choice of human rights was based on those proposed by the Chair of the UN Open-ended Working Group on Ageing in 2016 as being areas where further protection of the rights of older persons is needed³⁰:

- Equality and non-discrimination
- Autonomy
- Freedom from violence, abuse and neglect
- Care and support for independent living
- Health
- Access to justice
- Social protection and social security
- Work
- Education and life-long learning
- Participation in society, including public life

A set of core elements, or indicators, was developed for each right based on human rights standards enshrined in international and regional human rights treaties, advisory documents by human rights bodies, and where possible, documents of the UN Open-ended Working Group on Ageing (See Annex 3). The action plans or activities of the national strategies were then reviewed against these to assess the extent to which they address the rights concerned and are in line with

human rights standards. In addition, an assessment was made as to the extent the national strategies when implemented would contribute to the spirit of four other frameworks: the Arab Regional Strategy on Ageing, the Madrid International Plan of Action on Ageing, the Sustainable Development Goals and the Programme of Action of the International Conference on Population and Development.



Fedaa Qatatshsah/HelpAge Jordan

3. Contribution of national strategies to realizing international and regional frameworks

National strategies on ageing do not operate in a vacuum. They are often based on regional or international frameworks. This section comments on the contribution of the national strategies reviewed to the spirit of selected regional and international frameworks.

Gender

Gender equality is a core component of the SDGs and the ICPD. Despite this, the national strategies are weak on gender. There is little attention in the action plans to women's and men's different experiences of ageing. None of the strategies address gender inequalities across the life course. Violence, abuse and neglect of older persons is not addressed from a gender perspective. There is little on the disaggregation of date by gender, although the Syrian strategy requires this in data collection in humanitarian contexts.

The national strategies do little to challenge stereotypical gender-roles that limit women's full participation in society. The Jordanian strategy risks perpetuating such stereotypical roles under its objective for the enhancement of gender-sensitive participation of older persons in society by emphasizing older women's roles in meeting the needs of their households through craftwork and domestic professions, sewing businesses and watching over their grandchildren. The Syrian strategy includes establishing and supporting productive projects for older persons of

both genders. Special attention is given to older women who provide for their families. The strategy of Saudi Arabia goes further in terms of securing 'suitable' job opportunities for older women, their access to loans and credit facilities, literacy programmes and support to those taking care of their families, including grandmothers.

None of the strategies cater for the sexual and reproductive health and rights of either older women or older men. The national strategy of Saudi Arabia focuses on health and does address the particular health needs of older women. It includes setting goals to improve the health of older women and delay their ageing, targeting geriatric diseases that afflict women such as osteoporosis.

The strategy of Saudi Arabia also aims to encourage older women to contribute to the affairs of their local community and develop their participation in decision-making processes on issues affecting their lives. However, none of the strategies include measures to fully empower older women to participate in decision making processes at all levels.

3.1 The Sustainable Development Goals (SDGS), 2015

As with the regional strategy, there are elements in each of the national strategies to meet the SDGs³¹.

- SDG 1: Each strategy, except that of Saudi Arabia on health, includes social security and social protection measures which would contribute to ending poverty under SDG1 but none seek to introduce universal social pension schemes of an adequate level to provide income security for all people as they grow older.
- SDG 3: The measures on health in the strategies will contribute to SDG3 but none go as far as to provide for a fully comprehensive continuum of integrated health and social care for older persons as part of efforts to achieve universal health coverage.
- SDG 4: Education and lifelong learning is addressed in the strategies but is sometimes limited to vocational or literacy training and doesn't address other skills and capacities nor the right to utilize knowledge and learning.
- SDG 5: On gender equality, older women are featured in the Saudi Arabian strategy but none of the strategies address gender inequalities across the life course nor include measures to fully empower older women to participate in decision making processes, prevent violence, abuse and neglect and

- adopt policies and programmes that address the rights of older women.
- SDG 8: There are measures in the strategies on flexible retirement and to encourage older persons to continue working, however the strategies do not address age discrimination in employment, ageist attitudes in the workplace or reasonable accommodation to make workplaces accessible for older persons, all of which are necessary to ensure decent work in older age.
- SDG 10: The strategies do not address the negative effects of inequalities and discrimination that accumulate throughout the years, particularly for women, and are exacerbated in older age due to ageism and age discrimination. Addressing ageism and reforming laws and practices that discriminate on the basis of age are necessary to reduce inequalities in older age.
- SDG 11: The strategies include measures to contribute to this goal of inclusive and accessible cities and communities, however, they also need to ensure older persons are included in decisionmaking and urban design, and disaster resilience and response planning and support.

3.2 Programme of Action adopted at the International Conference on Population and Development (ICPD), 1994

The 25-year review of the ICPD in 2019 recognized that 'comprehensive policies should underpin the rights of older persons and prepare for an ageing world'. The Nairobi Summit recognized that global data on older persons are limited and that poverty, discrimination and violence affecting older persons, especially older women are seriously understudied. It stated that more qualitative and quantitative research on older persons is urgently needed and different long-term care options should be evaluated to learn key lessons.³²

Implementation of the national strategies in this review would contribute to the realization of the underpinning principles of the ICPD but, as the summary below shows, there are significant gaps:

- ICPD Principle 1: The first principle is that of the universality of human rights: everyone is born free and equal in dignity and in rights. While the national strategies address elements of some of the rights of older persons, they do not adequately address the right to equality and non-discrimination, take a comprehensive rights-based approach, nor address the full range of rights older persons enjoy.
- ICPD Principle 2: The plans do make efforts to ensure older persons are 'given the opportunity to make the most of their potential' under ICPD Principle 2, for example through measures around education and lifelong learning and access to work. However, the overall framing of older persons' lives as primarily located within the family and the lack of attention to public and political participation limits the strategies' impact on realising older persons' 'full potential' to limited spheres of life.
- ICPD Principle 3: On the right to development, as Table 2 illustrates, older persons and development features explicitly in most of the strategies. However, Principle 3 states that 'the human person is the central subject of development'. For older persons to be the 'central subject' of development more needs to be done to support their autonomy in all aspects of life, and their choice and control over the services they may need, rather than being the object of policies designed so that others do things to or for them, or make decisions on their behalf.
- ICPD Principle 4: On advancing gender equality, equity and the empowerment of women, as with SDG 5, a greater focus on the empowerment of older women across all of their rights and the elimination of intersectional discrimination based on age and gender are required. In addition, women and men continue to have sexual and reproductive health issues in older age and yet the sexual and reproductive health of older women and men is not addressed in any of the strategies.
- ICPD Principle 5: The strategies are grounded in Principle 5 since they focus on cultural, economic and social development

The 2018 review of the implementation of the 2013 Cairo Declaration made a number of recommendations on ageing, including mainstreaming ageing into broader development processes, including poverty reduction strategies; establishing databases on demographic, socio-economic and health changes in the region to inform policies and practice; and nurturing an enabling environment that empowers, values and invests in older persons' accumulated life experience and capabilities. In relation to health it promoted a life cycle approach for disease prevention and control, the adoption of an active ageing framework and the promotion of health education materials that teach self-care and support the messages of primary prevention. It also advocated for inclusion of a geriatric's specialization within education programmes at universities and ageing diseases within the 'health basket'. It encouraged the consideration of older persons in urban design.

With regard to human rights, the review recommended a human rights paradigm for advocating and implementing ageing policies, which should include recognising older persons' rights to financial security, health and social care and safe environments, involving grassroots and civil society organizations as well as older persons themselves. It recommended that all older persons, particularly older women, should live with dignity and security, free of discrimination on the basis of age and free of potential abuse and violence aimed against them. It also recommended supporting and encouraging the establishment of associations and networks of older persons.

A key message from the Arab Regional Conference on Population and Development, November 2018³³ was the need to ensure a paradigm shift in the approach to population issues, from one focused on controlling population growth, to a rights-based approach that enshrines human rights, including the freedom of choice to achieve gender equality and empowerment of older persons, involving them in developing economic and social policies and in the sustainable development process. The conference recognized the need to build the knowledge of decision makers who develop national and local sustainable development plans on population issues, sustainable development principles and the needs of older persons, and on how to incorporate those needs in policies, plans and budgets.

The conference also recommended conducting a critical review of the social values and customs that perpetuate social stereotypes regarding older persons and that support practices that limit their rights and weaken their capacity. It highlighted care and support for older persons as a regional priority and that rights-based policies and programmes should be developed that take into account older persons' needs and guarantee their autonomy, such as systems for social protection, retirement, comprehensive health care, including sexual and reproductive care, and protection against violence, neglect and physical and psychological abuse.

3.3 The Madrid International Plan of Action on Ageing (MIPAA), 2002

The contribution of the national strategies to MIPAA is most evident in the alignment of their respective pillars as Table 13 illustrates

Table 2: Summary of alignment of national strategy and MIPAA pillars.

MIPAA	Priority Direction I: Older persons and development	Priority direction II: Advancing health and well-being into old age	Priority direction III: Ensuring enabling supportive environments		
Egyptian national strategy	The contribution of older persons to development	2. Providing health care and maintaining the psychological health of older persons	3. Ensuring a more comprehensive supportive and caring environment for older persons		
Jordanian national strategy	Pillar One: Contribution of older persons to the development proces	Pillar Two: Advancement of health care for older persons	Pillar Three: Provision of a supportive physical environment and social care to older persons		
Saudi Arabian national strategy		Objective 1: To provide support for the National Strategy for the Health of Older Persons. Objective 2: To provide high-quality, comprehensive and integrated health services to older persons	Objective 6: To activate and revitalize the role of older persons in society Objective 7: To promote a positive perception on ageing in the community, household and among older persons themselves		
	Objective 3: To qualify health personnel to provide health care services for older persons Objective 4: To strengthen partnership between the concerned bodies in the health of older persons				
		Objective 5: To provide up-to-date data and information to decision makers, service providers and those concerned with the health of older persons			
Syrian national strategy	First Direction: Participation in development	Second Direction: Health Care Fourth Direction: Psychosocial Support Seventh Direction: Elderly care in Emergencies and crises	Third Direction: Supportive physical Environment Fifth Direction: Research, scientific studies and databases. Sixth Direction: Legislation and laws		
Tunisian national strategy		4. Health coverage for older persons5. Social coverage for older persons	Older persons and the family Older persons in their social environment Older persons and solidarity between generations		
United Arab Emirates federal law		Art. 7 - Social Services Art. 8 - Health Care Art. 13 - Reporting any Violence or Abuse	Art. 4 - The Right to Independence and Privacy Art. 6 - The Right to an Enabling Environment, Housing, Education and Work Art. 9 - Confidentiality of Information Art. 10 - Preferential Treatment Art. 12 - Document Proving the Age Art. 14 - Obligations of the Families of Senior Emiratis Art. 15 - Alternative Family Art. 16 - Services of the Elderly Foundations Art. 17 - Standards and Facilities		

3.4 Arab Regional Ageing Strategy 2019-2029

Although each of the strategies reviewed were developed before the adoption of the Arab Regional Ageing Strategy³⁴ [hereafter the regional strategy], the alignment between them means that effective implementation of the national strategies would contribute to that of the regional strategy.

We see this alignment across the pillars of the regional strategy, for example the establishment of day clubs and community centres in the national strategies would contribute to the first pillar on the status of older persons and their social and living conditions, as would the national commitments to improving design and accessibility of housing, transport and public places. Training of health workers and improving access to mobile and at-home health services would contribute to the regional strategy's second pillar on the health status of older persons. Activities in the national strategies on education, lifelong learning and closing the digital gap would contribute to the third regional pillar on social, economic and cultural participation of older persons. The Syrian strategy's focus on support to older persons during emergencies and crises would contribute to the fourth regional pillar on older persons in the context of war and conflict. Activities on fostering positive images of ageing and older persons

in a number of national strategies reviewed would support the fifth regional pillar on images in the media.

The regional strategy commits to the adoption of an Arab convention on the rights of older persons to guarantee the rights of older persons to a decent life, a secure future and to protect them from all forms of physical and moral abuse. As this rights-based review of national ageing strategies has shown, attention to the rights of older persons is currently limited to social, economic and cultural rights, and does not fully address every aspect of those rights. There is inadequate attention to their civil and political rights, including fundamental rights such as the rights to equality and non-discrimination, autonomy and access to justice.

Any future Arab convention on the rights of older persons should guarantee the full enjoyment of all human rights of older persons if it is to be in line with international standards and principles. National strategies in every country across the region should align themselves to the pillars of the regional strategy but need to go beyond this to include civil and political rights as well as all aspects of social, economic and cultural rights.

Table 3: Summary of alignment of national and regional strategy pillars

Arab Strategy Action Plan for Older Persons	Axis 1: Status of older persons and their social and living conditions	Axis 2: Health status of older persons	Axis 3: Social, economic and cultural participation of older persons	Axis 4: Older persons in the context of war and conflict	Axis 5: Media serving the image and issues of older persons
Egypt national strategy	3. Ensuring a more comprehensive supportive and caring environment for older persons	2. Providing health care and maintaining the psychological health of older persons	1. The contribution of older persons to development		Covered under the goal of changing negative trends towards ageing and creating positive ones.
Jordan national strategy	Pillar Three: Provision of a supportive physical environment and social care to older persons	Pillar Two: Advancement of health care for older persons	Pillar One: Contribution of older persons to the development process		Under Pillar Three: To raise public awareness to protect senior citizens against violence using different venues such as schools, universities, media outlets, mosques and seminars.

Saudi Arabia national strategy		Objective 1: To provide support for the National Strategy for the Health of Older Persons. Objective 2: To provide high-quality, comprehensive and integrated health services to older persons Objective 3: To qualify health personnel to provide health care services for older persons Objective 4: To strengthen partnership between the concerned bodies in the health of older persons Objective 5: To provide up-to-date data and information to decision makers, service providers and those concerned with the health of older persons	Objective 6: To activate and revitalize the role of older persons in society	Under Objective 7: Meeting the basic needs of older persons affected by situations of armed conflict, war, occupation or siege.	Objective 7: To promote a positive perception on ageing in the community, household and among older persons themselves
Syria national strategy	Third Direction: Supportive physical Environment Fifth Direction: Research, scientific studies and databases. Sixth Direction: Legislation and laws	Fourth Direction: Psychosocial	First Direction: Participation in development	Seventh Direction: Elderly care in emergencies and crisis	Included under First and Fourth Directions
Tunisian national strategy	1. Older persons and the family 2. Older persons in their social environment 3. Older persons and solidarity between generations 5. Social coverage for older persons	4. Health coverage for older persons	2. Older persons in their social environment		Included under 2. Older persons in their social environment

United Arab Emirates federal law Art. 4 - The Right to Independence and Privacy Art. 8 - Health

Care

Art. 6 - The Right to an Enabling Environment, Housing, Education and Work

Art. 7 - Social Services

Art. 9 -

Confidentiality of Information

Art. 10 -Preferential Treatment

Art. 12 - Document Proving the Age

Art. 13 - Reporting any Violence or Abuse

Art. 14 -

Obligations of the Families of Senior

Emiratis

Art. 15 -

Alternative Family

Art. 16 - Services of the Elderly Foundations Art. 17 - Standards and Facilities Art. 6 - The Right to an Enabling Environment, Housing, Education and Work Art. 10 -Preferential Treatment



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4. Realizing human rights

4.1 A rights-based approach to the dignity and wellbeing of older persons

In a rights-based assessment the first, overarching question is the extent to which the national strategies take a rights-based approach.

A rights-based approach is a way of working which is based on, and aims to realise, human rights. A rights-based approach to the dignity and well-being of older persons in all their diversity is about using international human rights principles and standards to ensure the rights of older persons are put at the centre of policies and practice. Three key components of a rights-based approach are:

- 1. Recognizing older persons as rights holders and the state as the duty bearer of those rights
- 2. Supporting older persons to claim their rights
- 3. Improving the capacity of duty bearers to meet their human rights obligations to older persons

4.1.1 Recognizing older persons as rights holders and states as duty bearers

The extent to which the rights of older persons are guaranteed in law indicates their recognition as rights holders and the state as the duty bearer.

Improving the guarantee of the rights of older persons within the law does feature in the national strategies but not across the full range of their rights. The Egyptian strategy, for example includes establishing a legislative framework on the rights of older persons and introducing legislation to make it easier for them to enjoy their rights to services. Facilitation of a legislative and regulatory environment supportive of older persons is a pillar in the Jordanian strategy but this is limited to enhancement of their contribution to development, provision of health and social care and a supportive physical environment. The Saudi Arabian strategy includes issuing legislation that guarantees the protection of older persons, considers them as citizens of priority and provides them with suitable facilities, and that criminalizes their ill-treatment at the family and community level. The Syrian strategy, includes providing a legal and legislative structure that supports the participation of older persons in development, covering health, the physical environment, violence, abuse and neglect, and care and support. The federal law of the United Arab Emirates ensures that older persons enjoy their fundamental rights and freedoms which are guaranteed in the constitution and legislations in force.

A review of the constitutions of the six states shows that discrimination on the ground of age is not explicitly recognized in any of equality or non-discrimination clauses. Where the rights of older persons are explicitly recognized, older age is framed as a time to be protected alongside childhood and motherhood³⁵ and/or as people to be taken care of and their needs met³⁶.

4.1.2 Supporting older persons to claim their rights

Two core elements are necessary to claim our rights: an understanding of what our rights are and mechanisms through which to claim them. In the national strategies, awareness raising activities focus on the value of older persons to society and promoting positive attitudes towards them but do not aim to build older persons' own understanding of their human rights. The strategies are weak on ensuring older persons have access to complaint, judicial or other types of mechanisms through which they can claim their rights and hold the state accountable to their human rights obligations towards them. Where they are mentioned, in the form of specialized judicial or social institutions in the Saudi Arabian strategy, it is in the context of protecting older persons, not empowering them to claim their rights. Only the federal law of the United Arab Emirates provides for the fast receipt and processing of complaints from older persons.

4.1.3 Improving the capacity of duty bearers to meet their human rights obligations to older persons

There are measures within the strategies which would improve the capacity of the state to meet its human rights obligations. These include commitments to review legislation, for example the periodic review of social security legislation to ensure a secure income that guarantees older persons a life of dignity, and ongoing monitoring such as tracking changes in living standards, both in the Jordanian strategy. Egypt committed to establishing a legal framework on the rights of older persons, Saudi Arabia to issuing laws that guarantee the protection of older persons and Syria to providing a legal structure that supports older persons' participation in sustainable development, a minimum income, healthcare and protection from violence. The United Arab Emirates fundamental law guaranteed older persons constitutional rights. Improving state capacity to meet their human rights obligations is also addressed through improving service delivery, for example the training of healthcare workers, in a number of strategies.

On building their capacity to develop and deliver the services outlined in the strategies, Egypt's national strategy commits to encouraging research centres and universities to include studies on older persons in their research, Jordan's to scientific research on older persons' issues in all areas and databases as tools for government decision-making, and Saudi Arabia's to providing up-to-date health data and information to decision makers, service providers and those concerned with older persons' health. Syria's national strategy commits to increasing research and improving the quality of data and information on older persons, Tunisia's to establishing a unified system for all data related to the health of older persons, and the United

Arab Emirates' fundamental law to establishing a database of violations towards older persons, services provided to them, and related research.

4.1.4 Rights-based approach: General recommendations

While there are some elements of a rights-based approach in the strategies, there are gaps in the range of rights they cover. To align with human rights standards and a rights-based approach, national strategies should

- Make provision for civil and political rights, and not limit older persons' lives to social, cultural and economic spheres.
- Include the rights to equality and nondiscrimination, autonomy and access to justice.
- Ensure the full scope of each rights is addressed, for example the right to access to palliative care is included under the rights to health or social care, and the right to autonomy is provided for in the delivery of care and support services.
- Ensure access to effective remedies and redress when older persons' rights are denied.

4.2 The rights of older persons

Using the list of rights identified by the Chair of the UN Open-ended Working Group on Ageing, this section explores the normative basis for each right, how our understanding of its application in older age has developed, and the extent to which it is provided for in the national strategies, concluding with recommendations on how to enhance the protection of each right in future laws, policies and strategies.

4.2.1 The right to equality and non-discrimination

The normative basis of the right to equality and nondiscrimination

The right to equality and non-discrimination is well established in international human rights law.³⁷ However, age is not explicitly listed as a prohibited ground for discrimination in the non-discrimination articles of international human rights treaties except in that on the rights of migrant workers.38 Age discrimination is not explicitly recognized in regional human rights treaties, except for the Charter of Fundamental Rights of the European Union and the two instruments dedicated to the rights of older persons, the Inter-American Convention on Protecting the Human Rights of Older Persons³⁹ (hereafter the Inter-American Convention) and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Older Persons in Africa⁴⁰ (hereafter the African Protocol). This gap in human rights law has led to inconsistent protection against age discrimination at the national level across constitutional, national, federal and state law, limitations in the areas of life to which protection against age discrimination applies and a range of exceptions where age discrimination is deemed lawful.41

Despite this, building on existing standards, human rights advisory documents⁴² and discussions at the UN Open-ended Working Group on Ageing⁴³ there is a better understanding on how the right to equality and non-discrimination applies in older age. Key elements include the prohibition of all forms of age discrimination including direct, indirect, by association, by perception or imputation, incitement, vilification, victimization, harassment and denial of reasonable accommodation. Age discrimination should be prohibited in every area of life, not just, for example, in employment. Intersectional discrimination, where discrimination is based on a combination of two or more characteristics such as age, gender and disability, should be prohibited. States should take steps to prevent, diminish and eliminate the conditions and attitudes which cause or perpetuate discrimination against older persons. Specific measures which are necessary to accelerate or achieve de facto equality of older persons should be provided for and not considered discrimination. Older persons should have access to effective remedies and redress when their right to equality and non-discrimination is denied.

Definition of discrimination against older persons

Discrimination against older persons is understood as any differential treatment, including but not limited to any distinction, exclusion, restriction or preference based directly or indirectly on age or any other ground, which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field.

The right to equality and non-discrimination in national strategies

Discrimination on the basis of age is not explicitly recognized in any of the six countries' constitutions. Each, with the exception of Saudi Arabia, has a generic equality clause that applies to everyone, but age is not listed as a ground for discrimination. It is not surprising, therefore, that ensuring the equality and non-discrimination of older persons does not feature in the national strategies. There is no recognition that older persons may be subjected to different forms of age discrimination in any area of life. Furthermore, there are no commitments to provide for this discrimination within the law nor measures to ensure older persons have access to effective remedies and redress when they are discriminated against.

While age discrimination and ageism are not recognized in the national strategies, all include measures to promote a positive perception of ageing or older persons in society, enhance their status in the community or to build intergenerational solidarity. Measures to achieve this centre around education or media awareness campaigns.

Country spotlight: Saudi Arabia

Intersectional discrimination is not recognized in any of the national strategies. Saudi Arabia's national strategy for the health of older persons does, however, propose integrating older women's issues into social development policies and programmes through, inter alia, combating all forms of discrimination on the basis of sex in legislation and laws and in their application. It also recognizes the need to consider the special requirements of older and single women.

There is no explicit recognition that measures necessary to accelerate or achieve de facto equality of older persons should be provided for and not considered discrimination. However, various types of preferential treatment for older persons are included, for example to hospital treatment in the strategy of Saudi Arabia, and to a range of services in the United Arab Emirates law on rights, including access to housing, health services, social assistance and benefits; use of gardens and parks; and transport. From a rights perspective, such specific measures should be temporary until de facto equality has been achieved.

Table 4: Summary of elements addressed in action plans and activities of the national strategies Recommendations

Elements	Egypt	Jordan	Saudi Arabia	Syria	Tunisia	United Arab Emirates
1. All forms of discrimination on the basis of age, alone or in combination with other prohibited grounds (intersectional discrimination), and in all areas of life, are prohibited under the law	No	No	No	No	No	No
2. Laws and policy documents do not discriminate on the grounds of age alone or in combination with other prohibited grounds	No	No	No	No	No	No
3. Measures to prevent, diminish and eliminate the conditions and attitudes which cause or perpetuate substantive or de facto discrimination against older persons	Partial (limited to awareness raising activities)	Partial (limited to awareness raising activities)	Partial (limited to awareness raising activities)	Partial (limited to awareness raising activities)	Partial (limited to awareness raising activities))	Partial (limited to awareness raising activities)
4. Specific measures which are necessary to accelerate or achieve de facto equality of older persons are provided for and not considered discrimination	No	No	Yes	Yes	No	Yes
5. Access by older persons to effective remedies and redress	No	No	No	No	No	No

Recommendations

To better ensure older persons can live free from discrimination and on an equal basis with others:

- Constitutions should be amended to include age as a ground for discrimination. This would have a significant knock-on effect on the recognition of age discrimination in national laws, policies and strategies.
- Prohibition of discrimination against older persons, including intersectional discrimination, in all areas of life should be included in future national strategies, policies and laws.
- Measures to eliminate all forms of discrimination in older age should be included in future national strategies, policies and laws. These go beyond promoting positive images and perceptions of older persons or ageing and include the removal of any barriers to the enjoyment of the rights of older persons, such as mandatory retirement ages or the use of upper age limits in access to goods and services.
- To ensure laws, policies and strategies do not discriminate against and have a negative impact on the rights of older persons, states should assess the impact of all their decisions on older persons in an age equality duty.



4.2.2 The right to autonomy

The normative basis of the right to autonomy

The rights to equal recognition before the law and the right to a family and private life are central to autonomy and are well-established under international human rights law.⁴⁴ However there are no explicit standards on how these rights apply in older age at the international level. At the regional level, the Inter-American Convention affirms the right of older persons to make their own decisions, determine their life plans⁴⁵ and express their free and informed consent on health matters⁴⁶. The African Protocol also recognizes the right of older persons to make their own decisions.⁴⁷

Building on these standards, human rights advisory documents⁴⁸ and discussions at the UN Open-ended Working Group on Ageing⁴⁹ there is a better understanding on how the right to autonomy applies in older age. Key elements include older persons having personal autonomy and independence over all aspects of their lives in line with their will and preferences and on an equal basis with others. Older persons have the right to enjoy legal capacity, to make decisions, to determine their life plans and to lead autonomous and independent lives. Support should be available to enable older persons to exercise their right to autonomy, including support with decision-making. This could include being able to designate one or more trusted persons to assist them to make decisions based on their instructions, will and preferences or make legally binding documents to express their will and preferences in advance. In addition to this, older

persons should have access to effective remedies and redress when their right to autonomy is denied.

The right to autonomy in national strategies

There is very little attention to older persons' right to autonomy and legal capacity in the national strategies. In the Jordanian strategy, for example, under the goal to enhance and protect the rights of older persons, the objective is to ensure a dignified life for older persons. However, autonomy has not been considered as part of a dignified life and there are no measures to ensure older persons can exercise it in the activities to meet this objective. The strategies of Syria and Egypt do not consider older persons' autonomy.

Where being able to make your own decisions is provided for it is limited to particular spheres of life. For example, while the federal law of the United Arab Emirates guarantees older Emiratis the right to manage their own lives with complete independence, it then limits this to their property, financial affairs, residence and health care. Although the national strategy of Saudi Arabia speaks of enabling older women to effectively use and choose health services, but in terms of their participation in decision-making processes, it limits this to issues affecting their lives and not wider societal or public affairs. The Tunisian national strategy includes providing more opportunities for older persons to participate in managing family affairs and in making family decisions, but not other aspects of their lives.

Country spotlight: Tunisia

There is nothing in the strategies about older persons' access to effective remedies and redress when their right to autonomy has been denied. However, in the Tunisian strategy there is a measure to create spaces in the departments of social advancement to provide reconciliation and counselling to help solve disputes between family members.

Support with decision-making is not addressed in the national strategies. While the federal law of the United Arab Emirates implicitly recognizes older persons' right to consent to medical treatment, it does not guarantee support with decision-making, such as advance directives where the older person can make their wishes known in advance or appointing trusted persons to support the older person to give consent.

Table 5: Summary of elements addressed in action plans and activities of the national strategies

Elements	Egypt	Jordan	Saudi Arabia	Syria	Tunisia	United Arab Emirates
1. Personal autonomy and independence over all aspects of their lives in line with their will and preferences and on an equal basis with others	No	No	Partial (older women only)	No	Partial (limited to family life)	Partial (limited to certain aspects of life)
2. Enjoyment of legal capacity, to make decisions, to determine life plans and to lead autonomous and independent lives in line with their will and preferences and on an equal basis with others	No	No	No	No	No	No
3. Support to enable older persons to exercise their right to autonomy and independence, including support with decision-making.	No	No	Yes	No	No	No
4. Access by older persons to effective remedies and redress	No	No	No	No	Partial (limited to family life)	No

Recommendations

The right of older persons to autonomy is central to a dignified life and needs to be provided for in national laws, policies and strategies.

- National strategies should recognize that personal autonomy and independence over all aspects of life is central to the dignity of older persons.
- Measures, including legal guarantees, should be put in place to ensure older persons continue to enjoy legal capacity on an equal basis with others, to make decisions, to determine life plans and to lead autonomous and independent lives in line with their will and preferences.
- Specific measures should be put in place to provide support with decision-making in all aspects of their lives to older persons who wish it.
- Older persons should have access to mechanisms that will provide effective remedies and redress when their right to autonomy has been denied.

4.2.3 The right to freedom from violence, abuse and neglect

The normative basis of the right to freedom from violence, abuse and neglect

The right to freedom from violence is enshrined in international human rights standards including those on the prohibition of torture, cruel, inhuman and degrading treatment.⁵⁰ At the regional level the Inter-American Convention⁵¹ and the African Protocol⁵² protect older persons from violence, abuse and neglect, and the Arab Charter on Human Rights protects all family members against violence⁵³.

Building on these standards, human rights advisory documents⁵⁴ and discussions at the UN Open-ended Working Group on Ageing⁵⁵ there is a better understanding on how the right to freedom from violence, abuse and neglect applies in older age. Older persons have the right to be free from all forms of violence, abuse and neglect, including physical, sexual, financial and emotional violence and abuse. This right applies in both public and private settings, including within the family, and states should take measures to

prevent all forms of violence, abuse and neglect of older persons in both of these settings. Older persons have the right to access a range of support services for victims, survivors and persons at risk of violence, abuse and neglect. Information and data on all forms of violence, abuse and neglect should be collected, disaggregated, analyzed, utilized and made public at regular intervals in compliance with internationally accepted norms and ethical principles in the collection and use of statistics. Older persons should have access to effective remedies and redress when their right to freedom from violence, abuse and neglect is denied.

The right to freedom from violence, abuse and neglect in the national strategies

Freedom from violence, abuse and neglect is treated inconsistently in the national strategies. The Egyptian and Tunisian strategies do not address it. Only one country, the United Arab Emirates, addresses the different forms of violence, abuse and neglect older persons may be subjected to.

Country spotlight: United Arab Emirates

The federal law defines violence as any intentional verbal abuse or use of force and offenses as any degrading treatment such as discrimination, abandonment, neglect, abuse, extortion or psychological abuse. This definition would include physical, emotional and financial abuse and neglect. Sexual abuse is not explicitly listed but would fall under this definition. However, that verbal abuse and use of force have to be intentional is problematic since it still allows for any violence deemed to be 'unintentional'.

The Jordanian, Saudi Arabian and Syrian national strategies include measures to prevent violence, abuse and neglect but do not recognize both public and private settings. All include public awareness raising campaigns on how to prevent violence, abuse and neglect of older persons, for example in schools, universities, media outlets, mosques and seminars in Jordan. Other preventive measures include awareness raising of older persons and those who are in contact with older persons, such as social workers, clerics, community leaders and psychological counselors, of violence, abuse and neglect.

In terms of access to support services for victims, survivors and older persons at risk, the Saudi Arabian strategy includes the establishment of a hotline. The Syrian strategy includes providing information on services and improving the counselling skills of social workers, psychologists, educational counselors, clerics, community leaders, and psychosocial counselors. The federal law of the United Arab Emirates obligates the state to take immediate protection procedures to stop any act of violence or abuse and provide adequate assistance to older persons subject to any form of violence or abuse.

Only one strategy, that of Jordan, provides for a database on cases of violence, abuse and neglect. It is also the only strategy that mentions any mechanism for older persons to report violence, abuse and neglect.

Table 6: Summary of elements addressed in action plans and activities of the national strategies

Elements	Egypt	Jordan	Saudi Arabia	Syria	Tunisia	United Arab Emirates
1. All forms of violence, abuse and neglect in public and private settings	No	No	No	Yes	No	Partial (not all forms)
2. Measures to prevent all forms of violence, abuse and neglect of older persons in public and private settings	No	Partial (limited to public awareness and training of staff)	Yes	Partial (limited to education and the media)	No	No
3. Access by older persons to a range of support services for victims, survivors and persons at risk of violence, abuse and neglect	No	No	No	Partial (limited to counselling and infor- mation)	No	Yes

4. Collection, disaggregation, analysis, utilisation and making public at regular intervals appropriate information and statistical data on all forms of violence, abuse and neglect, and compliance of all information gathering and research with internationally accepted norms and ethical principles in the collection and use of statistics	No	Yes	No	No	No	No
5. Access by older persons to effective remedies and redress	No	Partial (limited to reporting)	No	No	No	No

Recommendations

States need to ensure that they take a comprehensive approach to realizing older persons' right to freedom from violence, abuse and neglect.

- States should recognize the broad nature of the violence, abuse and neglect older persons can be subjected to and have measures in places to address all forms whether they occur in public or private settings.
- Awareness raising or training of the public, older persons and those who come in contact with them are important prevention measures, but others should be taken to complement this. These include:
 - Legislation on identification, investigation and redress, and sufficient resource allocation for its effective implementation
 - Appropriate needs assessments, regulation and monitoring of all facilities, and programmes designed to serve older persons, including care and support, whether provided by state or nonstate actors, should be effectively monitored by independent authorities
 - Research into the intersectional causes of violence, abuse and neglect.
- A range of support services appropriate for victims, survivors and those at risk should be provided including but not limited to health, psychosocial, rehabilitative and legal services, and access to information about support and services.
- Data on all forms of violence, abuse and neglect must be collected, disaggregated, analyzed, utilized and made public at regular intervals, and all information gathering and research should comply with internationally accepted norms and ethical principles in the collection and use of statistics.
- Older persons should have access to effective remedies and redress. This includes:
 - Ensuring older persons have access to mechanisms through which they can report violence, abuse and neglect that respect their autonomy and privacy
 - Investigating violations effectively, promptly, thoroughly and impartially and, where appropriate, taking action against those allegedly responsible in accordance with domestic and international law
 - Providing older persons who claim to be victims of violence, abuse and neglect with equal and effective access to justice, irrespective of who may ultimately be the bearer of responsibility for the violation

- Ensuring timely access by older persons to support, where necessary, to make autonomous decisions about reporting acts of violence, abuse and neglect
- Providing effective remedies to victims and survivors, including reparation. Criminal justice responses, criminal offences and sentencing practices should reflect the aggravated nature of offences against older persons. Prosecutorial action and compensatory damages should not be limited by older age.

4.2.4 The right to care and support for independent living

The normative basis of the right to care and support for independent living

The right to care and support for independent living is an important element of the right to social security 56 and enshrined in the Convention on the Rights of Persons with Disabilities⁵⁷. At the regional level the Arab Charter on Human Rights establishes the right of older persons to care and support. 58 The Inter-American Convention states that older persons have the right to a comprehensive system of care that not only protects their wellbeing but also maintains their independence and autonomy.⁵⁹ The African Protocol also establishes rights in relation to care and support. 60 Both the European Union Charter of Fundamental Rights⁶¹ and the European Social Charter⁶² recognize the right of older persons to live independent lives. Building on these standards, human rights advisory documents⁶³ and discussions at the UN OEWG⁶⁴ there is a better understanding on how the right to care and support for independent living applies in older age. Older persons have the right to care and support services which are adapted to their individual needs, promote and protect their wellbeing, maintain their dignity, autonomy and independence and enable them to fully participate in society, without discrimination of any kind. Care and support services should be available in all settings, public and private, including but not limited to in the home, in the community, and in residential settings. Older persons have the right to access information about all aspects of their care and support needs and services and in line with their right to autonomy, choice and control over and participation in their care and support services, and support to exercise this right if they need it. Holistic palliative care which is not limited to pain relief, or any particular treatment or setting should be part of the care and support services available. Older persons should have



access to effective remedies and redress when their right to care and support is denied.

The right to care and support in national strategies

None of the strategies identify the objective of care and support as being to enable older persons to live dignified, autonomous and independent lives and fully participate in society. The Saudi Arabian strategy includes vehicles for the personal use of older persons with disabilities so they can remain independent but generally the approach in the strategies centres on providing for older persons' basic daily or living needs, not their autonomy, independence and full participation in society. The Syrian strategy also places emphasis on psychosocial needs.

With regard to the provision of care and support services in the settings where older persons live, the Egyptian strategy focuses on care and support services for older persons living alone at home through the creation of employment of care providers and an alternative, or foster-type, family system. The Jordanian strategy includes in-house social services so older persons can age in place and encourages the private sector and philanthropists to provide in-house care services. The Tunisian strategy and federal law of the United Arab Emirates include multi-disciplinary mobile care teams to provide care and support at home. At the community level, day clubs are included as communitybased care and support services in the Jordanian, Syrian and Tunisian strategies. Encouraging the increase in the numbers of care homes run by the private sector or non-governmental organisations is part of the Jordanian and Syrian strategies.

Country spotlight: Jordan

The Jordanian strategy features making the places where older persons live accessible. This includes adapting older person' home and care homes to their needs, stimulating the public and private sectors to establish age-friendly residential compounds and providing housing loans at preferential interest rates to build and purchase age-friendly houses.

Access by older persons to information about care and support services available to them is not addressed in the strategies, nor was the provision of palliative care as part of care and support services. There is a general lack of provision for choice and control over care and support services in the strategies. The Syrian strategy provides for older persons' involvement in the management and investment in the social, cultural and entertainment clubs designated for them.

None of the strategies include mechanisms through which older persons can seek remedy and redress. Regulation and monitoring are primarily addressed through training and regulation of caregivers. For example, the Egyptian strategy includes caregivers having a minimum level of qualification to ensure the quality of service provided, with licenses being granted and renewed periodically. The Jordanian strategy requires accreditation and quality control standards for care homes and the Syrian strategy requires establishing standards and procedures to regulate the work of institutions working in this area. The Tunisian strategy also addresses training caregivers who provide specialized care and support at home, and the need for laws and regulatory texts to regulate this profession.

Table 7: Summary of elements addressed in action plans and activities of the national strategies

Elements	Egypt	Jordan	Saudi Arabia	Syria	Tunisia	United Arab Emirates
1. Care and support services which are adapted to older persons' individual needs, promote and protect their well-being, maintain their dignity, autonomy and independence and enable them to fully participate in society, without discrimination of any kind	No	No	No	No	No	No
2. Care and support services in all settings, public and private, including but not limited to in the home, in the community, and in residential settings	Partial (limited to older persons living alone)	Yes	No	Yes	Yes	Yes
3. Access to information about all aspects of their care and support needs and services	No	No	No	No	No	No
4. Holistic palliative care which is not limited to pain relief or any particular treatment or setting	No	No	No	No	No	No
5. Choice, control over and participation in their care and support services, and support to exercise this right	No	No	No	No	No	No
6. Access by older persons to effective remedies and redress	No	No	No	No	No	No

Recommendations

In line with human rights standards, care and support should do more than enable older persons to survive. It should enable them to live dignified, autonomous and independent lives as full members of society.

- Care and support services need to be designed to enable this in whatever setting they are provided.
- Older persons should be able to exercise their autonomy over their care and support services in line with their will and preferences. Information on services should be made available to them and support given if necessary, with decision-making so they can choose the setting in which they utilize services, the type of services they use, and who they are provided by.
- Care and support services should be integrated with health care and include access to holistic palliative care.
- The policies to increase the numbers of care homes is of particular significance given the lack of provision in the strategies for older persons to exercise their autonomy, choice and control over their care and support services and where they live. Older persons face a significant risk of institutionalization in care homes and a rights-based approach would rather be to encourage the provision of care and support services at home and in the community and transition away from services provided in institutional settings.

 Mechanisms should be made available to older persons so they can seek redress, with support if necessary, when their rights in this area have been denied.

4.2.5 The right to health

The normative basis of the right to health

The right to health is well-established under international human rights law.⁶⁵ At the regional level the right to health of every member of society is enshrined in the Arab Charter on Human Rights⁶⁶. The Inter-American Convention applies the right to health to older persons, including the access of older persons to their personal records⁶⁷ and their right to give free and informed consent on health matters.⁶⁸ The African Protocol also guarantees older persons the right to health care which meets their specific needs.⁶⁹

Building on these standards and human rights advisory documents⁷⁰ and discussions at the OEWG, there is a better understanding of how the right to health applies in older age. Realising this right for older persons would significantly contribute to the attainment of universal health coverage. Older persons have the right to a continuum of quality and appropriate physical, mental and cognitive health services available and accessible to them and which deliver primary, secondary and tertiary health care integrated with care and support, wherever they may reside. They have the

right to holistic palliative care, including access to essential drugs and controlled medicines. Older persons should have access to healthcare workers with relevant and adequate training in geriatric, dementia and palliative care, and health information in appropriate formats. In line with their right to autonomy, older persons should have access to support to make free and informed decisions about their health care and where it is provided, and enact legal and other mechanisms, including advance instructions about their healthcare, including palliative and end of life care. Health insurance should be available to older persons on an equal basis with others and without discrimination on the basis of their age. Older persons should have access to effective remedies and redress when their right to health is denied.

The right to health in national strategies

The strategies cover various aspects of health care but not access to a fully comprehensive continuum of integrated health and social care. The Tunisian strategy is the only one to explicitly integrate health and social care services. The main focus in the strategies is on geriatric healthcare with little distinction made between physical, mental and cognitive healthcare. The Egyptian strategy focuses on primary health care as the key source of healthcare for older persons and home medical services, although it also includes establishing specialized clinics and day hospitals for older persons. Healthcare provided at home is also a component of the Jordanian, Saudi Arabian and Tunisian strategies.

Making healthcare affordable features in the strategies with financial support available in Egypt, free medical tests in Jordan, free or reduced prices for health treatment, basic and essential medicines, audio-visual aids, dentures, and medical devices in Saudi Arabia, and access to free or low-cost treatment for some in Tunisia.

Training of health workers in geriatrics and older persons' health and establishment of specialized courses at universities is a key component of the Egyptian, Jordanian and Saudi Arabian strategies, for example training doctors, nurses, health visitors, psychologists, and social workers in primary health units in Egypt.

Access to palliative care is not included in any strategy.

Egypt, Jordan and Syria include awareness campaigns about healthy lifestyles, including nutrition and exercise and prevention of chronic diseases as a preventative measure.

In terms of providing information so older persons can make decisions about the healthcare and access services, the Egyptian strategy includes the provision of information on health services by advice centres for older persons and in information posters or booklets inside the health units. The Saudi Arabian strategy includes educating older persons on the types of available health services and how to benefit from them. The Syrian strategy includes familiarizing older persons, their families, and those dealing with them with preventive, curative and rehabilitative healthcare methods. Preparation of a guide to help older persons monitor their health status and maintain their safety is in the Tunisian strategy.

Country spotlight: Syria

Participation of older persons in the design of services they use is essential to ensure those services are appropriate to them. The Syrian strategy includes this participation of older persons, albeit limited to those with appropriate qualifications, competencies and professions, in the preparation of preventive, curative and rehabilitative integrated healthcare programmes and services.

Support with decision-making and informed consent is not addressed in the strategies, although the Saudi Arabian strategy does include enabling older persons to effectively use and choose health services.

Access to health insurance is included in the Egyptian strategy and is free for older persons in Jordanian strategy. In Syria older persons must be included in health insurance, with appropriate discounts. The federal law of the United Arab Emirates guarantees older persons access to medical insurance which would also cover home nursing and necessary assistive devices. None of the strategies address non-discrimination on the basis of age in insurance policies.

None of the strategies provide for mechanisms through which older persons can seek remedies and redress if their right to health is denied.

Table 8: Summary of elements addressed in action plans and activities of the national strategies

Elements	Egypt	Jordan	Saudi Arabia	Syria	Tunisia	United Arab Emirates
1. Continuum of quality and appropriate physical, mental and cognitive health services available and accessible to older persons and which deliver primary, secondary and tertiary health care integrated with care and support, wherever they may reside	Partial (not include integration of health and social care)	Partial (not include integration of health and social care)	Partial (not include integration of health and social care)	Partial (not include integration of health and social care)	Partial (no mention of cognitive health)	Partial (not include integration of health and social care)
2. Holistic palliative care, including access to essential drugs and controlled medicines	No	No	No	No	No	No

3. Healthcare workers with relevant and adequate training in geriatric, dementia and palliative care	Partial (no mention of dementia or palliative care)	Partial (no mention of dementia or palliative care)	Partial (no mention of dementia or palliative care)	Partial (no mention of dementia or palliative care)	Partial (no mention of dementia or palliative care)	No
4. Health information in appropriate formats	Yes	Partial (limited to lifestyle informa- tion)	Yes	Yes	Yes	No
5. Support to make free and informed decisions about their health care and where it is provided, and enact legal and other mechanisms, including advance instructions about health care, including palliative and end of life care	No	No	Yes	No	No	No
6. Health insurance on an equal basis with others and without discrimination on the basis of their age	Partial (no mention of non-discrimination on the basis of age)	Partial (no mention of non-discrimination on the basis of age)	No	Partial (no men- tion of non-dis- crimination on the ba- sis of age)	No	Partial (no men- tion of non-dis- crimination on the ba- sis of age)
7. Access by older persons to effective remedies and redress	No	No	No	No	No	No

Recommendations

While the national strategies contained a number of core components of the right to health, they were also lacking in a number of areas. Older people's right to health should be included in strategies towards universal health coverage.

- To ensure dignity and avoid pain and suffering at the end of life, access to palliative care should be integrated into health strategies. Palliative care should be holistic and include, but not be limited to pain relief or to any particular treatment. It should be accessible in a setting that is consistent with the needs, will and preferences of the older person, and older persons should have timely access to information about all aspects of their health and palliative care treatment options so they are able to express their free, prior, on-going and informed consent to their palliative care treatment and any other health matters.
- Support with decision-making so older persons can express their free, prior, on-going and informed consent should be provided and included in the strategies. This may include having a trusted person to assist with a decision, having information provided in an accessible way or being able to say in advance what type of treatment you would like in the future. Support with decision-making should never be imposed on an older person and decisions should always be made based on the older person's will and preferences of the best interpretation of them.

 As rights holders, older persons should be provided with mechanisms through which they can seek remedies and redress when any aspect of their right to health is denied.

4.2.6 The right to access to justice

The normative basis of the right to access to justice

The right to access justice is guaranteed in provisions in international human rights law on equal recognition before the law, the right to an effective remedy, freedom from arbitrary arrest or detention and the right to a fair trial.⁷¹ At the regional level the right is protected in the Arab Charter on Human Rights⁷². The right of older persons to access to justice is enshrined in the Inter-American Convention which emphasizes the need for timely judicial action and provision of procedural accommodations⁷³ and in the African Protocol, which includes the right to legal assistance and the training of law enforcement on interpretation of laws and policies to protect the rights of older persons.⁷⁴

Building on these standards and human rights advisory documents⁷⁵ and discussions at the OEWG, there is a better understanding of how the right to access to justice applies in older age. Older persons have the right to access to justice on an equal basis with others, free from discrimination on the basis of their age in all proceedings and in the award of damages. They have the right to reasonable accommodation to ensure their effective access to and participation in all aspects of



legal and administrative proceedings. This may include but is not limited to expediting proceedings, making existing facilities and services accessible, and providing specific support. Older persons have the right to access to justice entities and related emergency and support services, including legal aid, for example when they are the victims of crime or subject to a denial of their rights, in whatever setting they live in. Proceedings should be prompt, and remedies effective and appropriate. Older persons also have the right to access alternative, non-judicial pathways to justice, for example one-stop community justice centres, paralegal support, or Ombud's procedures. Older persons should have access to effective remedies and redress when their right to access to justice is denied.

The right to access to justice in the national strategies

Access to justice is both a human right in itself and cuts across every other right in terms of the necessity of rights being guaranteed within the law and mechanisms being available through which rights holders can claim those rights, and seek remedy and redress when they are denied.

As discussed in the section above on a rights-based approach, the national strategies vary in the extent to which they aim to guarantee older persons' rights within the law and have little on access to remedies and redress. They are also silent on older persons' access to justice. Only the Syrian strategy includes a measure to inform concerned parties about the latest legislation and laws pertaining to older persons and the training of the judiciary.

Table 9: Summary of elements addressed in action plans and activities of the national strategies

Elements	Egypt	Jordan	Saudi Arabia	Syria	Tunisia	United Arab Emirates
1. Reasonable accommodation to ensure older persons' effective access to and participation in all aspects of legal and administrative proceedings	No	No	No	No	No	No

2. Access to justice entities and related emergency and support services, including legal aid, for example when they are the victims of crime or subject to a denial of their rights, in whatever setting they live	No	No	No	No	No	No
3. Access to alternative, non-judicial pathways to justice	No	No	No	No	No	No
4. Prompt, effective and appropriate remedies	No	No	No	No	No	No
5. Freedom from discrimination on the basis of age in all proceedings and in the award of damages	No	No	No	No	No	No

Recommendations

The lives and rights of older persons should be addressed holistically by states. This includes ensuring their access to justice. Laws, policies and strategies should include measures which provide access to:

- Reasonable accommodation to ensure older persons' effective access to and participation in all aspects of legal and administrative proceedings. This may include but is not limited to expediting proceedings, making existing facilities and services accessible, and providing specific support
- Access to justice entities and related emergency and support services, including legal aid, for example when they are the victims of crime or subject to a denial of their rights, in whatever setting they live
- Access to alternative, non-judicial pathways to justice. These may include but are not limited to one-stop community justice centres, paralegal support, or Ombud's procedures
- Prompt, effective and appropriate remedies
- Freedom from discrimination on the basis of age in all proceedings and in the award of damages.

4.2.7 The right to social protection and social security

The normative basis of the right to social protection and social security

The right to social protection and social security is well established in international human rights law. ⁷⁶ It protects people against work-related income insecurity, unaffordable healthcare and insufficient support from families. At the regional level the Arab Charter on Human Rights guarantees the right of every citizen to social security, including social insurance. The right of older persons to social security so they can live in dignity is protected under the Inter-American Convention. ⁷⁷ The African Protocol obligates states to provide adequate pensions income security to older persons. ⁷⁸ The European Social Charter establishes the right of older persons to social protection to enable them to remain full members of society, to choose their lifestyle freely and to lead independent lives. ⁷⁹

Building on these standards and human rights advisory documents⁸⁰ and discussions at the OEWG⁸¹, there is a better understanding of how the right to social

protection and social security applies in older age. Older persons have the right to non-discrimination in access to social protection and social security measures, including on the grounds of age, gender, disability, migrant or refugee status. social protection and social security systems should provide universal coverage, be appropriate and acceptable for older persons' needs and preferences and be provided in an accessible and timely manner in whatever setting older persons live. In addition, social protection and social security measures should be of a high enough value, quantity and quality, and for the full period of life, for an adequate standard of living and so that older persons can live autonomous, independent lives with dignity and can fully participate in society. Older persons have the right to access to information on all aspects of social protection and social security measures, including eligibility and qualification. They also have the right to participate in decision-making processes, management and administration of social protection and social security measures. Older persons should have access to effective remedies and redress when their right to social protection and social security is denied.

The right to social protection and social security in the national strategies

The national strategies vary in the extent to which they cater for older persons' right to social protection and social security. Some are quite limited. The Saudi Arabian strategy will provide for the living needs of older women who are economically inactive. The federal law of the United Arab Emirates, guarantees preferential treatment in access to social assistance and benefits.

The Jordanian strategy aims to combat poverty and will introduce any necessary modifications to retirement systems to guarantee older persons a secure income in their older age, create a social safety net, operationalize the Islamic social solidarity instruments (Takaful) such as Zakat and Waqf to support older persons, and conduct periodic reviews of the amount of national aid given to older persons by the National Aid Fund. The Syrian strategy includes provisions to work towards including all working groups in the social security law and reduce poverty among older persons, for example meeting the basic living needs of those who are economically inactive, strengthening social safety nets

and aid programmes, and uncovering the neglect that some older persons face and working to overcome it.

In terms of universal coverage of social protection and social security systems, not only does the Tunisian strategy aims to improve it, but it also seeks to raise the legal age for retirement and reduce the number of people retiring early.

Country spotlight: Tunisia

Social protection and social security coverage should be universal, and schemes should be available to all older persons without discrimination including on the grounds of age, gender, disability, migrant or refugee status. The Tunisian strategy aims to include all workers by generalizing the legal social coverage to include casual and seasonal peasants, marine fishermen, unpaid workers, low-income workers and the casual workers of some public institutions involved in the National Retirement and Social Security Fund.

However, other elements of the right are not addressed in the national strategies. Only Tunisia includes carrying out extensive awareness-raising and educational campaigns in order to urge those legally entitled to enroll in social security. The focus in the strategies is on reducing poverty rather than providing an adequate standard of living so that older persons can live autonomous, independent lives with dignity and can fully participate in society. There are no measures to ensure schemes are appropriate and acceptable to older persons, or to include them in decision-making processes, management and administration of those schemes.

Table 10: Summary of elements addressed in action plans and activities of the national strategies

Elements	Egypt	Jordan	Saudi Arabia	Syria	Tunisia	United Arab Emirates
1. Social protection and social security systems which provide universal coverage	Yes	Yes	No	No	No	No
2. Social protection and social security measures that are of a high enough value, quantity and quality, and for the full period of life, for an adequate standard of living and so that older persons can live autonomous, independent lives with dignity and can fully participate in society	Partial (does not define what a 'suitable income' is for.)	No	No	No	No	No
3. Access to information on all aspects of social protection and social security measures, including eligibility and qualification	No	No	No	No	Yes	No
4. Non-discrimination in access to social protection and social security measures on the grounds of age, sex, disability, migrant or refugee status	No	Partial (limited to inclusion of Jordanian expatriates)	Partial (limited to older women)	No	No	No
5. Social protection and social security measures that are appropriate and acceptable for older persons' needs and preferences	No	No	No	No	No	No
6. Provision of social protection and social security measures in an accessible and timely manner in whatever setting older persons live	No	No	No	No	No	No
7. Older persons' participation in decision- making processes, management and administration of social protection and social security measures	No	No	No	No	No	No
8. Access by older persons to effective remedies and redress	No	No	No	No	No	No

Recommendations

While the national strategies contained a number of core components of the right to social security and social protection, they were also lacking in a number of areas.

- States should ensure universal coverage of social protection and social security systems, paying particular attention to non-discrimination in access.
- Social protection and social security measures should be of a high enough value, quantity and quality, and for the full period of life, for an adequate standard of living so that older persons can live autonomous, independent lives with dignity and can fully participate in society.
- Older persons should have access to information on all aspects of social protection and social security measures, including eligibility and qualification.
- Older persons should be able to participate in decision-making processes, management and administration of social protection and social security measures to ensure they are appropriate and acceptable for older persons' needs and preferences.
- Older persons should have access to effective remedies and redress when their right to social protection and social security is denied.

4.2.8 The right to work

The normative basis of the right to work

The right to work, encompassing the opportunity to make a living from work which is freely chosen, safe and fair conditions at work, access to training and a wage that is enough for an adequate standard of living, and the right not to be unfairly denied work is guaranteed under international human rights law. Work that meets these standards is often known as 'decent work'. At the regional level the right to work is guaranteed under the Arab Charter on Human Rights. The right of older persons to 'dignified and decent work' is protected in the Inter-American Convention and includes the gradual transition to retirement workplaces that take account of the needs and characteristics of older persons. The African Protocol also protects against discrimination in employment.

Building on these standards and human rights advisory documents⁸⁶ and discussions at the OEWG⁸⁷, there is a better understanding of how the right to work applies in older age. Older persons have the right to freedom from discrimination on the basis of age alone and in combination with other grounds in all matters related to employment, including but not limited to recruitment, conditions at work, renumeration, access to training, and the prohibition of mandatory retirement ages. They have the right to work when in receipt of a pension and to reasonable accommodation in the workplace. There should be flexible working conditions for those with caregiving responsibilities. Older persons should have access to flexible or gradual retirement schemes and determine themselves when, at what pace and to what extent to withdraw from the labour force. They should have access to careerdevelopment, technical and vocational guidance

programmes, placement services, and vocational and skills development programmes. Older persons should have access to effective remedies and redress when their right to work is denied.

The right to work in the national strategies

The federal law of the United Arab Emirates guarantees older persons the right to engage in any voluntary work in line with their interests and capacities and get any 'suitable' job opportunities, employment or training. However, 'suitable' was not defined and may limit the right of older persons to freely choose their work. Some support is provided for those older persons wishing to continue working. The Egyptian strategy encourages part-time work for older persons. The Jordanian national strategy commits to reviewing flexible employment in light of the demands of older persons who are capable and willing to work. The Syrian strategy aims to provide support and raise the professional competencies of older persons wishing to work. The Tunisian strategy includes developing retirement regulations to enable older persons to continue working for five years as long as they have the approval of the institutions that employ them.

Country spotlight: Syria

None of the strategies directly addresses the prohibition of mandatory retirement ages but the Syrian strategy includes the implementation of a study to determine a flexible optimal retirement age, taking into account the benefits of work on older persons' physical, psychological and mental health.

Preparation for retirement features in the Egyptian strategy, for example producing bulletins and awareness programmes to prepare the person who will retire to understand the changes that will happen and how to deal with them.

In relation to non-discrimination at work, the Saudi Arabian strategy promotes older women's access to work by facilitating loans and credit facilities to enable them to work and by securing financial assistance for those working in the informal sector. The Syrian strategy also focuses on older women by giving special attention to those who provide for their families when establishing productive projects.

Table 11: Summary of elements addressed in action plans and activities of the national strategies

Elements	Egypt	Jordan	Saudi Arabia	Syria	Tunisia	United Arab Emirates
1. Freedom from discrimination on the basis of age alone and in combination with other grounds in all matters related to employment, including but not limited to recruitment, conditions at work, renumeration, access to training, and the prohibition of mandatory retirement ages	No	No	No	No	No	Partial (limited to adequate job oppor- tunities)
2. Right to work when in receipt of a pension	No	No	No	No	No	No
3. Reasonable accommodation in the workplace	No	No	No	No	No	No
4. Flexible working conditions for those with caregiving responsibilities	No	Partial (limited to review of flexible working system)	No	No	No	No
5. Older persons determine when, at what pace and to what extent to withdraw from the labour force	No	No	No	No	No	No
6. Access to flexible or gradual retirement schemes	No	Partial (limited to review of flexible working system)	No	No	Partial (limited to a period of 5 years)	No
7. Access to career-development, technical and vocational guidance programmes, placement services, and vocational and skills development programmes	No	No	No	Yes	No	Yes
8. Access by older persons to effective remedies and redress	No	No	No	No	No	No

Recommendations

The strategies contain some measures to support older persons to continue working but more needs to be done to ensure their right to work in older age.

- Age discrimination should be prohibited in law and eliminated in practice in all matters related to employment, including but not limited to recruitment, conditions at work, renumeration, access to training, and the prohibition of mandatory retirement ages. Intersectional discrimination, for example against older women or older persons with disabilities, should also be addressed.
- The right to work when in receipt of a pension should be guaranteed.
- Older persons should be able to determine when, at what pace and to what extent to withdraw from the labour force. Flexible working conditions for those with caregiving responsibilities, access to flexible or gradual retirement schemes, access to career-development, technical and vocational guidance programmes, placement services, and vocational and skills development programmes and reasonable accommodation for individual older persons in the workplace can support the realisation of this right.
- Older persons should have access to mechanisms through which they can seek remedies and redress when their right to work is denied.

4.2.9 The right to education and lifelong learning

The normative basis of the right to education and lifelong learning

The right to education is guaranteed under international human rights law⁸⁸. The Convention on the Rights of Persons with Disabilities states the purpose of education is 'the full development of human potential and sense of dignity and self-worth, and the strengthening of respect for human rights, fundamental freedoms and human diversity.'⁸⁹ At the regional level the Arab Charter on Human Rights guarantees the right to adult education for every citizen⁹⁰. The Inter-American Convention guarantees older persons the right to participate in educational programmes at all levels and share their knowledge and experience with all generations.⁹¹ The African Protocol obligates states to provide opportunities for older persons to have access to education and to acquire ICT skills.⁹²

Building on these standards and human rights advisory documents⁹³ and discussions at the OEWG⁹⁴, there is a better understanding of how the right to education applies in older age. Older persons have the right to all forms of lifelong learning, education and skills-building. These include but are not limited to tertiary education, vocational training and retraining, digital and new technology-based education, adult education, self, informal, recreational and community-based education, lifelong learning programmes, legal literacy, and skills training in literacy, numeracy and technological competencies. Older persons have the right to acquire, utilize and transmit their knowledge and skills without discrimination and on an equal basis with others. They have the right to both equal access to opportunities of lifelong learning, education and skills-building available to the general public and learning opportunities adapted to their specific requirements, including duration of study and communication needs, skills, motivations, preferences, cultural and diverse identities. Lifelong learning, education and skills-building opportunities should be affordable and financially accessible to them, and available in settings that are physically accessible to older persons, including in their communities and in care and support settings. Quality lifelong learning, education and skills-building opportunities should be delivered by skilled teachers and trainers. Older persons have the right to participate as teachers and sharers of knowledge, and in the design and development of the shape and content of lifelong learning, educational and skills-building programmes. Older persons should have access to effective remedies and redress when their right to education and lifelong learning is denied.

The right to education and lifelong learning in the national strategies

The national strategies include some provision for education and lifelong learning. The federal law of the United Arab Emirates guarantees the right to participate in continuing education programmes and adult education. The Jordanian strategy aims to foster initiatives that support the teaching and training of older persons. The Saudi Arabian strategy includes opportunities for older women to take literacy classes and pursue their qualifications and education

to empower them. Reducing the illiteracy rate is an objective of the Syrian and Tunisian strategies. Improving digital, IT or online skills is included in the Jordanian, Syrian and Tunisian strategies, and as discussed above, a number include training related to employment.

Education and lifelong learning are about more than vocational training to stay economically productive. It's also about acquiring life-skills to manage and be resilient to the changes that life brings. The Egyptian strategy includes preparation of older workers for their life beyond work, the changes that retirement will bring and how to deal with them. The Syrian strategy includes educating older persons about the developments that happen to them at this stage in order to assess the extent of their capabilities and how to develop them.

Ensuring that education and lifelong learning is adapted to the needs and interests of older persons is central to their rights in this area. The Syrian strategy includes implementing training and rehabilitation programmes for older persons in the fields that suit them and are compatible to their needs. However, it does not define what these fields are nor state how older persons themselves participate in the design and delivery of such training.

Country spotlight: Tunisia

Older persons are included in the management and administration of third-generation universities to secure training in the fields they desire. However, education and lifelong learning in older age should not be confined to programmes designed only for older persons. Access to education opportunities open to the general public is also a right. The Tunisian strategy also includes a measure to enable older persons who wish to learn and train to pursue their education in other public institutions.

Table 12: Summary of elements addressed in action plans and activities of the national strategies

Elements	Egypt	Jordan	Saudi Arabia	Syria	Tunisia	United Arab Emirates
1. Right to acquire, utilize and transmit their knowledge and skills without discrimination and on an equal basis with others	No	No	No	No	No	No
2. All forms of lifelong learning, education and skills-building These include but are not limited to tertiary education, vocational training and retraining, digital and new technology-based education, adult education, self, informal, recreational and community-based education, lifelong learning programmes, legal literacy, and skills training in literacy, numeracy and technological competencies.	Partial (limited to preparing for retirement)	Partial (limited to digital skills)	Partial (limited to older women's literacy skills and education)	Partial (limited to literacy, vocational skills, pre- paring for retirement, digital skills, their rights)	universi-	Partial (limited to continuing education programmes and adult education)
3. Equal access to opportunities of lifelong learning, education and skills-building available to the general public	No	No	No	No	No	No
4. Learning opportunities adapted to the specific needs of older persons, including duration of study and communication needs, skills, motivations, preferences, cultural and diverse identities	No	No	No	Yes	Yes	No
5. Lifelong learning, education and skills- building opportunities that are affordable and financially accessible to them	No	No	No	No	No	No
6. Lifelong learning, education and skills-building opportunities in settings that are physically accessible to older persons, including in their communities and in care and support settings	No	No	No	No	No	No
7. Quality lifelong learning, education and skills-building opportunities delivered by skilled teachers and trainers	No	No	No	No	No	No
8. Participation as teachers and sharers of knowledge and in the design and development of the shape and content of lifelong learning, educational and skills-building programmes	No	No	No	No	Partial (limited to manage- ment and administra- tion)	No
9. Access by older persons to effective remedies and redress	No	No	No	No	No	No

Recommendations

While the strategies address some elements of the right to education and lifelong learning, critical components are missing.

- The right to education and lifelong learning is not only concerned with acquiring knowledge and skills but also with utilizing and transmitting these. Older persons' rights to utilize and acquire their knowledge and skills without discrimination and on
- an equal basis with others should be guaranteed and supported in practice.
- All forms of education and lifelong learning should be available to older persons and should not be limited to those assumed to be 'suitable' or 'appropriate' to older age.

- In order to ensure learning opportunities are adapted to the specific needs and preferences of older persons, their right to participate as teachers and sharers of knowledge and in the design and development of the shape and content of lifelong learning, educational and skills-building programmes should also be provided for.
- Strategies should ensure equal access to education and lifelong learning opportunities available to the general public as well as dedicated programmes available only to older persons.
- Accessibility needs to be addressed, by ensuring education and lifelong learning opportunities are affordable to all older persons and available in settings that are physically accessible to older persons, including in their communities and in care and support settings.
- Attention needs to be paid to the quality of education and lifelong learning opportunities, which should be delivered by skilled teachers and trainers.
- Older persons should have access to mechanisms to seek remedies and redress when their right to education and lifelong learning is denied.

4.2.10 The right to participation in society The normative basis of the right to participation in society

The right to participate as a full member of society in public, political, social, economic and cultural life is enshrined in international human rights law.⁹⁵ At the regional level the Arab Charter on Human Rights establishes that every citizen has the right to take part in political and public life⁹⁶ and every person in cultural life⁹⁷. The Inter-American Convention guarantees the right to participation and community integration⁹⁸, to participate in the cultural and artistic life of the community⁹⁹ and to participate in political and public life on an equal basis with others¹⁰⁰. The African Protocol guarantees older persons the right to active participation in socio–economic development, cultural programmes, leisure and sports.¹⁰¹

Building on these standards and human rights advisory documents¹⁰² and discussions at the OEWG, there is a better understanding of how the right to participation in society applies in older age. The right encompasses participation in all aspects of life, including political, public, social, economic, cultural and leisure activities. It also encompasses participation at all levels of society, including household, community and national. Older persons have the right to participate in society in every setting they may live, including in their own home or in a care and support setting. They have the right to non-discrimination on the basis of their age or on the basis of a combination of grounds in standing for election, voting or participating in political or public life. States must take measures to ensure the digital inclusion of older persons. Older persons should have access to effective remedies and redress when their right to participate in society is denied.

The right to participation in society in the national strategies

The federal law of the United Arab Emirates guarantees the state will take measures to integrate older persons in society. The Syrian strategy includes enabling older persons to participate in the social, cultural, recreational and environmental fields and voluntary work. The Egyptian strategy provides for the use of youth centres and sports clubs in the morning periods and during the academic year for social and recreational services for older persons. The Tunisian strategy encourages intergenerational activities such as establishing partnership agreements with the cultural and youth centres to facilitate the participation of older persons in their activities and in the preparation and implementation of their programmes; creating more occasions around national and religious holidays; cultural festivals to provide opportunities for meeting and sharing between generations; and urging associations of retired persons and older persons to diversify their programmes and improve the contents of their activities in order to provide opportunities for the participation of other generations.

Physical access through transportation is addressed in a number of strategies. The Egyptian strategy includes facilitating older persons' mobility so they can continue their role in development. The federal law of the United Arab Emirates commits the state to providing appropriate transportation for older persons as does the Jordanian strategy. The Saudi Arabian strategy includes free transportation or discounts and special tariffs for older persons and vehicles for the personal use of older persons with disabilities to enable their independence. The Syrian strategy includes developing transportation to suit the needs of older persons. Urging public transport companies in cities to allocate seats for older persons and enable them to board through the front doors is included in the Tunisian strategy.

Access is also addressed through the design of public spaces. The Egyptian strategy includes designing various public facilities and services such as streets, sidewalks and metro stations so they are accessible to older persons. The Jordanian strategy includes the adjustment of public facilities, places of worship and recreational areas and design of road intersections, crossings and footbridges to be accessible for older persons. The Saudi Arabian strategy obliges all facilities to consider the needs and capabilities of older persons when designing buildings and health facilities. It also includes the establishment of public recreational facilities designed to serve a society in which all generations coexist. The Syrian strategy has measures to redesign traffic intersections and pedestrian bridges, provide support devices for older persons in public spaces, and take advantage of neglected areas and rehabilitate them as parks or community centres for activities for older persons. The Tunisian strategy calls for creating spaces for the mutual use by different generations for cultural, sports and entertainment activities. It also encourages municipalities to create more public spaces and parks equipped with seats and sanitation facilities for older persons.



Country spotlight: Jordan

The Jordanian strategy addresses one aspect of age discrimination that can restrict older persons' participation in society through conducting periodic reviews of the terms of granting driving licenses to older persons and not linking the granting of licenses to age.

The participation of older women in social and economic activities such as civil society organisations involved in voluntary work and social and cultural clubs is emphasized in the Jordanian strategy. The Saudi Arabian strategy encourages the contributions of older women to the affairs of the local community and the Syrian strategy includes enhancing the participation of older women in programmes and projects that affect their lives.

Older persons' participation in decision-making is addressed in the Jordanian strategy through establishing an advisory board comprised of older persons and increasing the rate of senior citizen participation in decision-making bodies, although which bodies and at which level is not specified. The

Saudi Arabian strategy establishes forums for the health of older persons with membership open to anyone over sixty years of age. The Syrian strategy establishes a national body for older persons to coordinate and integrate efforts and follow up on the implementation of programmes related to the care of older persons; a flexible mechanism to benefit from the experiences of older persons as consultants, volunteers and people with experience with governmental and private agencies; and holding dialogue meetings and joint workshops with the participation and preparation of older persons. The Syrian strategy also includes involving older persons in the management of social, cultural and entertainment clubs designated for them. In the Tunisian strategy, participation in decisionmaking is addressed through inclusion of a specified percentage of older persons in a higher council on older persons at the national level, municipal councils and neighbourhood committees and on the boards of public institutions.

The Tunisian strategy explicitly aims to allow older persons to join the information society and become familiar with dealing with digital culture and, along with Jordan and Syria as discussed above, provide for enhancing older persons' digital skills.

Table 13: Summary of elements addressed in action plans and activities of the national strategies

Elements	Egypt	Jordan	Saudi Arabia	Syria	Tunisia	United Arab Emirates
1. Participation in all aspects of life, including political, public, social, economic, cultural and leisure activities	Yes	Partial (limited to social and economic community engagement)	Partial (limited to a health forum)	Yes	Partial (limited to economic, social and cultural activities)	Yes
2. Participation at all levels of society, including household, community and national	No	Partial (limited to community and national)	Partial (limited to older women at community level)	Partial (limited to community and national level)	Yes	Partial (limited to communi- ty)
3. Participation in society in whatever setting an older person lives, including in their own home or in a care and support setting	Partial (limited to an 'age- friendly' built environment and transport)	Partial (limited to an 'age- friendly' built environment and transport)	Partial (limited to an 'age- friendly' built environment and transport)	Partial (limited to an 'age- friendly' built environment and transport)	Partial (limited to an 'age- friendly' built environment and transport)	Partial (limited to transport)
4. Non-discrimination on the basis of age alone or in combination with other grounds in standing for election, voting or participating in political or public life	No	No	No	No	No	No
5. Measures to ensure the digital inclusion of older persons	No	Yes	No	Yes	Yes	No
6. Access by older persons to effective remedies and redress	No	No	No	No	No	No

Recommendations

The strategies focus on the participation of older persons in social, economic and cultural life. However, there is little on their participation in political life beyond inclusion in some decision-making bodies. Older persons have the right to participate as full members of society in every aspect of life.

- Older persons' participation in public and political life on an equal basis with others should be guaranteed and supported by states. This includes ensuring non-discrimination on the basis of age alone or in combination with other grounds in forming associations, standing for election, voting or participating in any aspect of political or public life.
- Older persons' full participation in activities and decision-making at the household level also needs to be addressed.
- Older persons' right to full participation in society applies in whatever setting they live and whatever their support needs. Care and support services must go beyond daily and living activities and provide support which enables those with support needs to participate as full members of society in all aspects of life and decision-making of their household, community and wider society. Support services should be put in place to ensure this is provided in whatever setting older persons with support needs choose to live.
- Particular attention should be paid to ensuring the digital inclusion and participation of older persons.
- Older persons should have access to effective remedies and redress when their right to participation as full members of society is denied.

5. Conclusion

There is much in the strategies that if implemented fully and effectively would advance the enjoyment of the rights of older persons. Making public transport and the environments older persons live in more accessible, for example, would help realise their right to fully participate in society. Access to literacy training, adult education and other skills-building would enable their right to education and lifelong learning.

However, there are also significant gaps. The strategies address some elements of the rights covered but they do not address them all. For example, access to palliative care is not included under health and social care. There are no measures to ensure older persons can exercise their autonomy over their care and support services in line with their will and preferences. Another significant gap is the lack of measures to ensure older persons' access to effective remedies and redress when these rights are denied.

Another gap is the range of rights covered. Human rights are interdependent and indivisible and yet the strategies focus on social, economic and cultural rights. There is little on civil and political rights. This limited focus perpetuates a concept of our lives in older age as confined to social and cultural life with some engagement in economic activity, rather than a continued life as full members of society in all its aspects, including civil and political life.

The strategies fail to address equality and non-discrimination in older age, older persons' autonomy and their access to justice, all of which are central to a rights-based understanding of dignity in older age which centres around older persons determining and controlling their own lives, making their own decisions and living independently, with support if necessary, based on what is important to them. There is limited attention to the intersectional and cumulative discrimination older women can face on the basis of their older age and gender. Older person's rights within conflict and humanitarian settings are only addressed in two of the six strategies.

These gaps are perhaps unsurprising, as there is no comprehensive guide on the rights of older persons from which these states can draw. The rights of older persons are currently fragmented and dispersed throughout existing international human rights instruments, with little specific articulation on how they apply in older age. The existing international and regional ageing strategies also do not adequately address the enjoyment of all human rights in older age. Under these circumstances it is hard to develop comprehensive rights-based national ageing strategies. An additional challenge is that the Arab convention on the rights of older persons committed to in the Arab regional strategy will also be limited if it is developed in the absence of a comprehensive international guide.

This review of national strategies clearly demonstrates

the need for such a guide, in the form of a UN convention on the rights of older persons. A convention would bring the rights of older persons all into one place, articulate how they apply in the unique and particular context of older age, and trigger the changes necessary in national legislation and the policies and strategies developed to put the law into practice.

It is only when older persons enjoy the full range of their rights in every setting and context in which they live that they will be able to live dignified, autonomous, independent lives as full members of society. National ageing strategies have an important role to play in this, but only if they too address the full range, and all the elements of, older persons' rights.



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Annex 1: Summary of recommendations

Rights-based approach: General recommendations

While there are some elements of a rights-based approach in the strategies, there are gaps in the range of rights they cover. To align with human rights standards and a rights-based approach, national strategies should

- Make provision for civil and political rights, and not limit older persons' lives to social, cultural and economic spheres.
- Include the rights to equality and nondiscrimination, autonomy and access to justice.
- Ensure the full scope of each rights is addressed, for example the right to access to palliative care is included under the rights to health or social care, and the right to autonomy is provided for in the delivery of care and support services.
- Ensure access to effective remedies and redress when older persons' rights are denied.

Rights within the national strategies

1. The right to equality and non-discrimination

To better ensure older persons can live free from discrimination and on an equal basis with others:

- Constitutions should be amended to include age as a ground for discrimination. This would have a significant knock-on effect on the recognition of age discrimination in national laws, policies and strategies.
- Prohibition of discrimination against older persons, including intersectional discrimination, in all areas of life should be included in future national strategies, policies and laws.
- Measures to eliminate all forms of discrimination in older age should be included in future national strategies, policies and laws. These go beyond promoting positive images and perceptions of older persons or ageing and include the removal of any barriers to the enjoyment of the rights of older persons, such as mandatory retirement ages or the use of upper age limits in access to goods and services.
- To ensure laws, policies and strategies do not discriminate against and have a negative impact on the rights of older persons, states should assess the impact of all their decisions on older persons in an age equality duty.

2. The right to autonomy

The right of older persons to autonomy is central to a dignified life and needs to be provided for in national laws, policies and strategies.

- National strategies should recognize that personal autonomy and independence over all aspects of life is central to the dignity of older persons.
- Measures, including legal guarantees, should be put in place to ensure older persons continue to enjoy legal capacity on an equal basis with others, to make decisions, to determine life plans and to lead

- autonomous and independent lives in line with their will and preferences.
- Specific measures should be put in place to provide support with decision-making in all aspects of their lives to older persons who wish it.
- Older persons should have access to mechanisms that will provide effective remedies and redress when their right to autonomy has been denied.

3. The right to freedom from violence, abuse and neglect

States need to ensure that they have a comprehensive approach to realizing older persons' right to freedom from violence, abuse and neglect.

- States should recognize the broad nature of the violence, abuse and neglect that older persons can be subjected to and have measures in places to address all forms whether they occur in public or private settings.
- Awareness raising or training of the public, older persons and those who come in contact with them are important prevention measures, but others should be taken to complement this. These include
 - Legislation on identification, investigation and redress, and sufficient resource allocation for its effective implementation
 - Appropriate needs assessments, regulation and monitoring of all facilities, and programmes designed to serve older persons, including care and support, whether provided by state or nonstate actors, should be effectively monitored by independent authorities
 - Research into the intersectional causes of violence, abuse and neglect.
- A range of support services appropriate for victims, survivors and those at risk should be provided including but not limited to health, psychosocial, rehabilitative and legal services, and access to information about support and services.
- Data on all forms of violence, abuse and neglect must be collected, disaggregated, analyzed, utilized and made public at regular intervals, and all information gathering and research should comply with internationally accepted norms and ethical principles in the collection and use of statistics.
- Older persons should have access to effective remedies and redress. This includes
 - Investigating violations effectively, promptly, thoroughly and impartially and, where appropriate, taking action against those allegedly responsible in accordance with domestic and international law
 - Providing older persons who claim to be victims of violence, abuse and neglect with equal and effective access to justice, irrespective of who may ultimately be the bearer of responsibility for the violation
 - Ensuring timely access by older persons to support, where necessary, to make autonomous decisions about reporting acts of violence, abuse and neglect

 Providing effective remedies to victims and survivors, including reparation. Criminal justice responses, criminal offences and sentencing practices should reflect the aggravated nature of offences against older persons. Prosecutorial action and compensatory damages should not be limited by older age.

4. The right to care and support for independent living

In line with human rights standards, care and support should do more than enable older persons to survive. It should enable them to live dignified, autonomous and independent lives as full members of society.

- Care and support services need to be designed to enable this in whatever setting they are provided.
- Older persons should be able to exercise their autonomy over their care and support services in line with their will and preferences. Information on services should be made available to them and support given if necessary, with decision-making so they can choose the setting in which they utilize services, the type of services they use, and who they are provided by.
- Care and support services should be integrated with health care and include access to holistic palliative care.
- The policies to increase the numbers of care homes is of particular significance given the lack of provision in the strategies for older persons to exercise their autonomy, choice and control over their care and support services and where they live. Older persons face a significant risk of institutionalization in care homes and a rights-based approach would rather be to encourage the provision of care and support services at home and in the community and transition away from services provided in institutional settings.
- Mechanisms should be made available to older persons so they can seek redress with support if necessary when their rights in this area have been denied.

5. The right to health

While the national strategies contained a number of core components of the right to health, they were also lacking in a number of areas. Older people's right to health should be included in strategies towards universal health coverage.

To ensure dignity and avoid pain and suffering at the end of life, access to palliative care should be integrated into health strategies. Palliative care should be holistic and include, but not be limited to pain relief or to any particular treatment. It should be accessible in a setting that is consistent with the needs, will and preferences of the older person, and older persons should have timely access to information about all aspects of their health and palliative care treatment options so they are able to express their free, prior, on-going and informed consent to their palliative care treatment and any other health matters.

- Support with decision-making so older persons can express their free, prior, on-going and informed consent should be provided and included in the strategies. This may include having a trusted person to assist with a decision, having information provided in an accessible way or being able to say in advance what type of treatment you would like in the future. Support with decision-making should never be imposed on an older person and decisions should always be made based on the older person's will and preferences of the best interpretation of them
- As rights holders, older persons should be provided with mechanisms through which they can seek remedies and redress when any aspect of their right to health is denied.

The right to access to justice

The lives and rights of older persons should be addressed holistically by states. This includes ensuring their access to justice. Laws, policies and strategies should include measures which provide access to:

- Reasonable accommodation to ensure older persons' effective access to and participation in all aspects of legal and administrative proceedings. This may include but is not limited to expediting proceedings, making existing facilities and services accessible, and providing specific support
- Access to justice entities and related emergency and support services, including legal aid, for example when they are the victims of crime or subject to a denial of their rights, in whatever setting they live
- Access to alternative, non-judicial pathways to justice. These may include but are not limited to one-stop community justice centres, paralegal support, or Ombud's procedures
- Prompt, effective and appropriate remedies
- Freedom from discrimination on the basis of age in all proceedings and in the award of damages.

7. The right to social protection and social security

While the national strategies contained a number of core components of the right to social security and social protection, they were also lacking in a number of areas.

- States should ensure universal coverage of social protection and social security systems, paying particular attention to non-discrimination in access.
- Social protection and social security measures should be of a high enough value, quantity and quality, and for the full period of life, for an adequate standard of living so that older persons can live autonomous, independent lives with dignity and can fully participate in society.
- Older persons should have access to information on all aspects of social protection and social security measures, including eligibility and qualification.
- Older persons should be able to participate in decision-making processes, management and administration of social protection and social

- security measures to ensure they are appropriate and acceptable for older persons' needs and preferences.
- Older persons should have access to effective remedies and redress when their right to social protection and social security is denied.

8. The right to work

The strategies contain some measures to support older persons to continue working but more needs to be done to ensure their right to work in older age.

- Age discrimination should be prohibited in law and eliminated in practice in all matters related to employment, including but not limited to recruitment, conditions at work, renumeration, access to training, and the prohibition of mandatory retirement ages. Intersectional discrimination, for example against older women or older persons with disabilities should also be addressed.
- The right to work when in receipt of a pension should be guaranteed.
- Older persons should be able to determine when, at what pace and to what extent to withdraw from the labour force. Flexible working conditions for those with caregiving responsibilities, access to flexible or gradual retirement schemes, access to careerdevelopment, technical and vocational guidance programmes, placement services, and vocational and skills development programmes and reasonable accommodation for individual older persons in the workplace can support the realisation of this right.
- Older persons should have access to mechanisms through which they can seek remedies and redress when their right to work is denied.

9. The right to education and lifelong learning

While the strategies address some elements of the right to education and lifelong learning, critical components are missing.

- The right to education and lifelong learning is not only concerned with acquiring knowledge and skills but also with utilizing and transmitting these. Older persons' right to utilize and acquire their knowledge and skills without discrimination and on an equal basis with others should be guaranteed and supported in practice.
- All forms of education and lifelong learning should be available to older persons and should not be limited to those assumed to be 'suitable' or 'appropriate' to older age.
- In order to ensure learning opportunities are adapted to the specific needs and preferences of older persons, their right to participate as teachers and sharers of knowledge and in the design and development of the shape and content of lifelong learning, educational and skills-building programmes should also be provided for.
- Strategies should ensure equal access to education and lifelong learning opportunities available to the general public as well as dedicated programmes available only to older persons.

- Accessibility needs to be addressed, by ensuring education and lifelong learning opportunities are affordable to all older persons and available in settings that are physically accessible to older persons, including in their communities and in care and support settings.
- Attention needs to be paid to the quality of education and lifelong learning opportunities, which should be delivered by skilled teachers and trainers.
- Older persons should have access to mechanisms to seek remedies and redress when their right to education and lifelong learning is denied.

10. The right to participation in society

The strategies focus on the participation of older persons in social, economic and cultural life. There is little on their participation in political life beyond inclusion in some decision-making bodies. Older persons have the right to participate as full members of society in every aspect of life.

- Older persons' participation in public and political life on an equal basis with others should be guaranteed and supported by states. This includes ensuring non-discrimination on the basis of age alone or in combination with other grounds in forming associations, standing for election, voting or participating in any aspect of political or public life.
- Older persons' full participation in activities and decision-making at the household level also needs to be addressed.
- Older persons' right to full participation in society applies in whatever setting they live and whatever their support needs. Care and support services must go beyond daily and living activities and provide support which enables those with support needs to participate as full members of society in all aspects of life and decision-making of their household, community and wider society. Support services should be put in place to ensure this is provided in whatever setting older persons with support needs choose to live.
- Particular attention should be paid to ensuring the digital inclusion and participation of older persons.
- Older persons should have access to effective remedies and redress when their right to participation as full members of society is denied.

Annex 2: Documents reviewed

Egypt

- National Care for Older Persons in Egypt Strategy and Action Plan Until 2015, 2007, Unofficial translation of relevant parts by HelpAge International Eurasia and Middle East Regional Office, August 2020
- Constitution of The Arab Republic of Egypt 2014 (Unofficial translation)

Iordan

- National Strategy for Senior Citizens 2018-2022, towards a society for all ages, National Council for Family Affairs
- Constitution of 1952 with Amendments through 2016, constituteproject.org
- Comprehensive National Plan for Human Rights 2016-2025

Saudi Arabia

- The National Strategy for the Health of Older Persons in the Kingdom of Saudi Arabia (2010– 2015), Ministry of Health, Unofficial translation of relevant parts by HelpAge International Eurasia and Middle East Regional Office, August 2020
- Saudi Arabia's Constitution of 1992 with Amendments through 2005, constituteproject.org

Syria

- General Directions of the National Strategy for Older Persons' Care in the Syrian Arab Republic 2014-2020, 2014, Syrian Commission for Family and Population Affairs, Population Directorate, Unofficial translation of relevant parts by HelpAge International Eurasia and Middle East Regional Office, August 2020
- Syrian Arab Republic's Constitution of 2012, constituteproject.org

Tunisia

- 10 Years Plan for Elderly 2003 2012, 2004, Ministry of Social Affairs and Solidarity
- Constitution of 2014, constituteproject.org

United Arab Emirates

- On the Rights of Senior Emiratis, Federal Law No. 9, 2019 https://lexmena.com/law/en_fed~2019-12-19_00009_2020-03-07/
- Constitution of 1971 with Amendments through 2009, constituteproject.org



Annex 3: Framework for rights-based review of national ageing strategies in selected countries in the Arab League

Overarching considerations: legal guarantees and effective remedies

Two overarching considerations will be whether the national strategy seeks to ensure that the rights of older persons are fully quaranteed within the law and that older persons have access to effective remedies and redress when their rights are denied.

Core elements of rights against which to assess national ageing strategies

Core elements of each right will be used to assess the strategies. These elements are based on human rights standards enshrined in existing international and regional human rights treaties, advisory documents by human rights bodies, and where possible, documents of the Open-ended Working group on Ageing. The tables below present the elements and their normative hasis

1. Equality and non-discrimination

Right Equality and non-discrimination

Elements

1. All forms of discrimination on the basis of age, alone or in combination with other prohibited grounds (intersectional discrimination), and in all areas of life, are prohibited under the law

Definition of discrimination:

Discrimination against older persons is understood as any differential treatment, including but not limited to any distinction, exclusion, restriction or preference based directly or indirectly on age or any other ground, which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field.

Forms of discrimination against older persons include discrimination that is direct, indirect, by association, by perception or imputation, incitement, vilification, victimization, harassment and denial of reasonable accommodation.¹⁰³

- 2. Laws and policy documents do not discriminate on the grounds of age alone or in combination with other prohibited grounds
- 3. Measures to prevent, diminish and eliminate the conditions and attitudes which cause or perpetuate substantive or de facto discrimination against older persons
- 4. Specific measures which are necessary to accelerate or achieve de facto equality of older persons are provided for and not considered discrimination
- 5. Access by older persons to effective remedies and redress

International human rights law

- Universal Declaration of Human Rights, 1948, Article 2,
- International Covenant on Economic, Social and Cultural Rights, 1966, Article 2
- International Covenant on Civil and Political Rights, 1966, Article 2 and Article 26
- Convention on the Elimination of All Forms of Discrimination against Women, 1979, Article 2
- Convention on the Rights of the Child, 1989, Article 2
- Convention on the Rights of Persons with Disabilities, 2006, Article 5
- International Convention on the Protection of the Rights of All Migrant Workers and their Families, 1990, Article 7

Advisory documents

Committee on Economic, Social and Cultural Rights, General Comment No. 20, Non-discrimination in economic, social and cultural rights (art. 2, para. 2, of the International Covenant on Economic, Social and Cultural Rights), E/C.12/GC/20, 2009 https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fGC%2f20&Lang=en

Regional human rights law

- Inter-American Convention on Protecting the Human Rights of Older Persons, 2015, Article 5
- Protocol to the African Charter on Human and Peoples' Rights on the Rights of Older Persons in Africa, 2016, Article 3
- Arab Charter on Human Rights, 2004, Article 11 and 22

Advisory documents

Council of Europe recommendation CM/Rec (2014)2, II. Non-discrimination

UN Open-ended Working Group on Ageing

- Background analytical paper on equality and non-discrimination, 8th session, 2017 https://social. un.org/ageing-working-group/documents/eighth/Background%20analytical%20papers/Analysis_ Equality.pdf
- Chair's summary of the 8th session of the OEWG, 2017 https://social.un.org/ageing-working-group/documents/eighth/ChairSummary.pdf
- Compilation working document 1, Normative content on the protection of the rights of older persons to equality and non-discrimination received from Member States, "A" Status National Human Rights Institutions and accredited non-governmental organizations, 2018 https://social. un.org/ageing-working-group/documents/ninth/2018_07_06_Compliation_Working_Doc_ EqualityNonDiscrimination%20(003).pdf

2. Autonomy

Right

Autonomy

Elements

- 1. Personal autonomy and independence over all aspects of their lives in line with their will and preferences and on an equal basis with others
- 2. Enjoyment of legal capacity, to make decisions, to determine life plans and to lead autonomous and independent lives in line with their will and preferences and on an equal basis with others
- 3. Support to enable older persons to exercise their right to autonomy and independence, including support with decision-making.

For example, being able to designate one or more trusted persons to assist them to make decisions based on their instructions, will and preferences or make legally binding documents to express their will and preferences in advance.

4. Access by older persons to effective remedies and redress

International human rights law

- Universal Declaration of Human Rights, 1948, Article 6 & Article 12
- International Covenant on Political and Civil Rights, 1966, Article 16 & Article 17: 1
- Convention on the Rights of Persons with Disabilities, 2006, Article 5.1, Article 12, Article 22.1 & Article 23.1

Regional human rights law

- Inter-American Convention on Protecting the Human Rights of Older Persons, 2015, Article 7, Article 11
- Protocol to the African Charter on Human and Peoples' Rights on the Rights of Older Persons in Africa, 2016, Article 5
- The EU Charter of Fundamental Rights, 2000, Article 25
- European Social Charter, Article 23
- Arab Charter on Human Rights, 2004, Article 11 and 22

Advisory documents

Council of Europe recommendation CM/Rec (2014)2, III. Autonomy and participation

UN Open-ended Working Group on Ageing

- OHCHR, Analysis and overview of guiding questions on autonomy and independence received from Member States, "A" Status National Human Rights Institutions and accredited non-governmental organizations, 2018, https://social.un.org/ageing-working-group/documents/ninth/OEWGA9_ Substantive_Report_Autonomy_Independence_OHCHR.pdf
- Substantive Inputs in the form of Normative Content for the Development of a Possible International Standard on the Focus Areas "Autonomy and Independence" and "Long-term and Palliative Care", 2019, A/AC.278/2019/CRP.4, https://social.un.org/ageing-working-group/ documents/tenth/A_AC.278_2019_CRP.4.pdf

3. Freedom from violence, abuse and neglect

Right Freedom from violence, abuse and neglect

Elements

- 1. All forms of violence, abuse and neglect in public and private settings
- 2. Measures to prevent all forms of violence, abuse and neglect of older persons in public and private settings
- 3. Access by older persons to a range of support services for victims, survivors and persons at risk of violence, abuse and neglect
- 4. Collection, disaggregation, analysis, utilization and making public at regular intervals appropriate information and statistical data on all forms of violence, abuse and neglect, and compliance of all information gathering and research with internationally accepted norms and ethical principles in the collection and use of statistics
- 5. Access by older persons to effective remedies and redress

International human rights law

Convention of the Rights of Persons with Disabilities, 2006, Article 15 and Article 16.2

Advisory documents

- The Committee on the Elimination of Discrimination Against Women's General Recommendation No. 27 on older women and protection of their human rights, 2010, CEDAW/C/GC/27 https://www.ohchr.org/EN/HRBodies/CEDAW/Pages/Recommendations.aspx
- The Committee on the Elimination of Discrimination Against Women's General recommendation
 No. 35 -- sixty-seventh session on gender-based violence against women, updating general
 recommendation No. 19, 2017, CEDAW/C/GC/35 https://www.ohchr.org/EN/HRBodies/CEDAW/
 Pages/Recommendations.aspx

Regional human rights law

- Inter-American Convention on Protecting the Human Rights of Older Persons (2015), Article 9 and Article 10.
- Protocol to the African Charter on Human and Peoples' Rights on the Rights of Older Persons in Africa (2016), Article 8 and Article 9
- Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women (2003), Article 22b.
- Arab Charter on Human Rights, 2004, Article 33.2

Advisory documents

Council of Europe recommendation CM/Rec (2014)2, IV. Protection from violence and abuse

UN Open-ended Working Group on Ageing

- Background analytical paper on neglect, violence and abuse, 2017, https://social.un.org/ageing-working-group/documents/eighth/Background%20analytical%20papers/Analysis_Violence.pdf
- Chair's summary of the 8th session of the OEWG, 2017 https://social.un.org/ageing-working-group/ documents/eighth/ChairSummary.pdf
- Compilation working document: Normative content on the protection of the rights of older persons from violence, neglect and abuse received from Member States, "A" Status National Human Rights Institutions and accredited non-governmental organizations, 2018, https://social.un.org/ageingworking-group/documents/ninth/2018_06_29_Compilation_Working_Doc_Violence-Neglect-Abuse_DESA.pdf

4. Care and support for independent living

Right Care and support for independent living

Elements

- 1. Care and support services which are adapted to older persons' individual needs, promote and protect their well-being, maintain their dignity, autonomy and independence and enable them to fully participate in society, without discrimination of any kind
- 2. Care and support services in all settings, public and private, including but not limited to in the home, in the community, and in residential settings
- Access to information about all aspects of their care and support needs and services
- 4. Holistic palliative care which is not limited to pain relief or any particular treatment or setting
- 5. Choice, control over and participation in their care and support services, and support to exercise this right
- 6. Access by older persons to effective remedies and redress

International human rights law

- Convention on the Rights of Persons with Disabilities, 2006, Article 19
- International Covenant on Civil and Political Rights, 1966, Article 9.1

Advisory documents

- The Committee on the Elimination of Discrimination Against Women's General Recommendation No. 27 on older women and protection of their human rights, 2010, CEDAW/C/GC/27 https:// www.ohchr.org/EN/HRBodies/CEDAW/Pages/Recommendations.aspx
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5. Health

Right

Health

Elements

- 1. Continuum of quality and appropriate physical, mental and cognitive health services available and accessible to older persons and which deliver primary, secondary and tertiary health care integrated with care and support, wherever they may reside
- 2. Holistic palliative care, including access to essential drugs and controlled medicines
- 3. Healthcare workers with relevant and adequate training in geriatric, dementia and palliative care
- 4. Health information in appropriate formats
- 5. Support to make free and informed decisions about their health care and where it is provided, and enact legal and other mechanisms, including advance instructions about health care, including palliative and end of life care
- 6. Health insurance on an equal basis with others and without discrimination on the basis of their age
- 7. Access by older persons to effective remedies and redress

Normative basis

International human rights law

- Universal Declaration of Human Rights, 1948, Article 25
- International Covenant on Economic, Social and Cultural Rights, 1966, Article 12
- Convention on the Elimination of All Forms of Discrimination against Women, 1979, Article 12
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- Arab Charter on Human Rights, 2004, Article 39

Advisory documents

 Council of Europe's Recommendation CM/Rec (2014)2, consent to medical care paragraphs 36-39 and palliative care paragraphs 44-50

6. Access to justice

Right Access to justice

Elements

1. Reasonable accommodation to ensure older persons' effective access to and participation in all aspects of legal and administrative proceedings

Reasonable accommodation may include but is not limited to expediting proceedings, making existing facilities and services accessible, and providing specific support.

- 2. Access to justice entities and related emergency and support services, including legal aid, for example when they are the victims of crime or subject to a denial of their rights, in whatever setting they live
- 3. Access to alternative, non-judicial pathways to justice

These may include but are not limited to one-stop community justice centres, paralegal support, or Ombud's procedures.

- 4. Prompt, effective and appropriate remedies
- 5. Freedom from discrimination on the basis of age in all proceedings and in the award of damages

Normative basis

International human rights law

- Universal Declaration of Human Rights, 1948, Article 8, Article 9, Article 10, Article 11
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- Convention on the Rights of Persons with Disabilities, 2006, Article 13

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- Protocol to the African Charter on Human and Peoples' Rights on the Rights of Older Persons in Africa, 2016, Article 4
- Arab Charter on Human Rights, 2004, Articles 12, 13,14, 16, 18, 19

Advisory documents

Council of Europe recommendation CM/Rec (2014)2, VII. Administration of justice

7. Social protection and social security

Right Social protection and social security

Elements

- 1. Social protection and social security systems which provide universal coverage
- 2. Social protection and social security measures that are of a high enough value, quantity and quality, and for the full period of life, for an adequate standard of living and so that older persons can live autonomous, independent lives with dignity and can fully participate in society
- 3. Access to information on all aspects of social protection and social security measures, including eligibility and qualification
- 4. Non-discrimination in access to social protection and social security measures on the grounds of age, gender, disability, migrant or refugee status
- 5. Social protection and social security measures that are appropriate and acceptable for older persons' needs and preferences
- 6. Provision of social protection and social security measures in an accessible and timely manner in whatever setting older persons live
- 7. Older persons' participation in decision-making processes, management and administration of social protection and social security measures
- 8. Access by older persons to effective remedies and redress

International human rights law

- Universal Declaration of Human Rights, 1948, Article 22
- International Covenant on Economic, Social and Cultural Rights, 1966, Article 9
- Convention on the Elimination of All Forms of Discrimination Against Women, 1979, Article 11
- Convention on the Rights of Persons with Disabilities, 2006, Article 28

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Regional human rights law

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- Protocol to the African Charter on Human and Peoples' Rights on the Rights of Older Persons in Africa, 2016, Article 7
- Arab Charter on Human Rights, 2004, Article 36

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Council of Europe recommendation CM/Rec (2014)2, V. Social protection and employment

- Substantive Inputs on the Focus Area "Social protection and social security (including social protection floors)" (A/AC.278/2019/CRP.3) - Working document submitted by the Office of the High Commissioner for Human Rights (OHCHR), 2019, https://social.un.org/ageing-workinggroup/documents/tenth/A_AC.278_2019_CRP.3.pdf
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8. Work

Right

Work

Elements

- 1. Freedom from discrimination on the basis of age alone and in combination with other grounds in all matters related to employment, including but not limited to recruitment, conditions at work, renumeration, access to training, and the prohibition of mandatory retirement ages
- 2. Right to work when in receipt of a pension
- 3. Reasonable accommodation in the workplace
- 4. Flexible working conditions for those with caregiving responsibilities
- 5. Older persons determine when, at what pace and to what extent to withdraw from the labour force
- 6. Access to flexible or gradual retirement schemes
- 7. Access to career-development, technical and vocational guidance programmes, placement services, and vocational and skills development programmes
- 8. Access by older persons to effective remedies and redress

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International human rights law

- Universal Declaration of Human Rights, 1948, Article 23
- International Covenant on Economic, Social and Cultural Rights, 1966, Article 6 & Article 7
- International Covenant on Political and Civil Rights, 1966, Article 8
- Convention on the Elimination of All Forms of Discrimination Against Women, 1979, Article 11
- International Convention on the Protection of the Rights of all Migrant Workers and Members of Their Families. 1990
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- Arab Charter on Human Rights, 2004, Articles 34 and 35

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9. Education and life-long learning

Right Education and life-long learning

Elements

- 1. Right to acquire, utilize and transmit their knowledge and skills without discrimination and on an equal basis with others
- 2. All forms of lifelong learning, education and skills-building

These include but are not limited to tertiary education, vocational training and retraining, digital and new technology-based education, adult education, self, informal, recreational and community-based education, lifelong learning programmes, legal literacy, and skills training in literacy, numeracy and technological competencies.

- 3. Equal access to opportunities of lifelong learning, education and skills-building available to the general public
- 4. Learning opportunities adapted to the specific needs of older persons, including duration of study and communication needs, skills, motivations, preferences, cultural and diverse identities
- 5. Lifelong learning, education and skills-building opportunities that are affordable and financially accessible to them
- 6. Lifelong learning, education and skills-building opportunities in settings that are physically accessible to older persons, including in their communities and in care and support settings
- 7. Quality lifelong learning, education and skills-building opportunities delivered by skilled teachers and trainers
- 8. Participation as teachers and sharers of knowledge and in the design and development of the shape and content of lifelong learning, educational and skills-building programmes
- 9. Access by older persons to effective remedies and redress

International human rights law

- Universal Declaration of Human Rights, 1948, Article 26
- International Covenant on Economic, Social and Cultural Rights, 1966, Article 13
- Convention on the Elimination of All Forms of Discrimination Against Women, 1979, Article 10
- Convention on the Rights of Persons with Disabilities, 2006, Article 24

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10. Participation in society

Right Participation in society

Indicators

- 1. Participation in all aspects of life, including political, public, social, economic, cultural and leisure activities
- 2. Participation at all levels of society, including household, community and national
- 3. Participation in society in whatever setting an older person lives, including in their own home or in a care and support setting
- 4. Non-discrimination on the basis of age alone or in combination with other grounds in standing for election, voting or participating in political or public life
- 5. Measures to ensure the digital inclusion of older persons
- 6. Access by older persons to effective remedies and redress

Normative basis

International human rights law

- Universal Declaration of Human Rights, 1948, Article 21 & Article 27
- International Covenant on Political and Civil Rights, 1966, Article 25
- Convention on the Elimination of All Forms of Discrimination Against Women, 1979, Article 7
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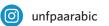
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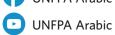


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