Ageing & Development

News and analysis of issues affecting the lives of older people Issue 27 / May 2010



Veronique is one of many older people caring for children after the earthquake.

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Rebuilding lives in Haiti

Four months after the Haiti earthquake, more attention still needs to be paid to older people, says HelpAge International.

About 230,000 people died and 3.5 million have been affected by the earthquake that struck the country in January, according to government figures. HelpAge International estimates that at least 200,000 older people have been affected.

Some, like Veronique, 73, have children in their care. "My house was destroyed," she says. "I was sleeping there with five children. I don't have the means to earn money. Before I used to sell *pepe* (second-hand clothes). Everyone in our family has the same problem – all of us have children to care for."

Many people, such as Remercier Guillout, 67, have lost close relatives. "My son was at college and the college collapsed," she says. "He was 21 years old. I am so shaken that I've lost my son. I don't have anyone to support me. My only hope is to find a little business and do it."

An assessment by a number of agencies, coordinated by the Office for Coordination

of Humanitarian Affairs and the Haitian government, found that older people were one of the two most vulnerable groups affected by the earthquake.

Some agencies have responded to older people's needs, for example, by providing transport after discharge from hospital, helping with rubble removal and constructing accessible latrines and shower units in camps. One agency has trained community health workers to assess the health of older people in camps and some have successfully lobbied for the creation of more secure areas for older and disabled people.

However, most agencies are not specifically targeting older people, a review by HelpAge International has found. For example, in the first three months, agencies distributed food rations without checking that older people could collect them or that families were passing them on to older members.

Besides providing practical assistance to older people and their families, HelpAge has been influencing agencies to include older people in their response. "Lack of attention to older people is due in part to lack of knowledge of who and where they are," says Jonathan Barden, HelpAge International emergency programme coordinator. "It is essential to collect data on over-60s broken down by age and sex, and include criteria such as whether they are housebound, in ill health, caring for children or living alone, in order to develop appropriate responses."

Humanitarian response for older people in Haiti: three months on HelpAge International, 2010 Visit our website for news, blogs, photos and survivors' stories www.helpage.org

Sign up for our eNewsletter at: www.helpage.org/enewsletter





Women and health: today's evidence, tomorrow's agenda *World Health Organization*, 2009

This report marks a major step forward in the debate on older women's health. It shows that, despite some progress, societies are still failing women at key times in their lives, including their older years.

The report highlights the global health transition away from infectious diseases to chronic diseases, which particularly impact on older women. It points out that women in developing countries are often confronted by a dual burden of "threats related to infectious

Good health for older women is an attainable goal.

Population ageing and international development: from generalisation to evidence

Peter Lloyd-Sherlock, Policy Press, 2010

Materials on ageing and development are few and far between, so Peter Lloyd-Sherlock's new book is especially welcome.

Taking key themes from pensions and health to social relations, family life and care, and supplementing these with country case studies from India, Argentina and South Africa, the book subjects some of the generalisations about ageing and development to robust critical analysis.

The book contends that ageing is integral to development, and not a threat, and that both development and ageing processes are variable and diverse, and not reducible to generalising statements. The approach taken is illustrated by the discussion of the impact of population ageing on economic performance. Noting that some commentators have described an "old-age crisis" of falling birth rates and ageing, economicallydependent populations which will drag economies down, the book looks at the evidence from various angles.

It finds that the effects of dependency ratios, economic productivity, and welfare and health provision vary greatly across and even within different societies. For example, it notes that old-age dependency ratios are based on questionable assumptions, such as that older people do not work. This ignores the one in five over-65s who remain in employment worldwide (higher in poorer countries) as well as those carrying out part-time or unpaid work, such as looking after grandchildren. diseases and maternal conditions alongside emerging challenges associated with non-communicable chronic diseases".

All the report's key findings affect older women at least as much as any other age group. It refers to the "widespread and persistent inequities" between the health of men and women. Although women generally outlive men in nearly all developing countries, for many old age is likely to be lived in chronic ill-health.

The report calls for "age-friendly environments" for older women. This includes access to appropriate health services which cater for older women's particular needs.

Good health for older women in all societies is an attainable goal. By highlighting this challenge, this report is making a major contribution to its achievement.

The book emphasises that both individual experiences of ageing, and the impact of ageing populations on development, are complex, difficult to predict and highly dependent on context.

HelpAge International, incidentally, is quoted disapprovingly for generalising about older people in poor countries as "the poorest of the poor".

But on one generalisation we can agree, which is "the failure of most policies in most countries to generate financially sustainable interventions that maximise wellbeing for all in later life".

This is our collective challenge, and this important book should be required reading for policy-makers whose decisions will influence ageing and development in the coming years.

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Stepping up support to care

The UK medical journal *The Lancet* is not known to exaggerate. A recent editorial comment described the potential burden of dementia as a "tidal wave" for low- and middle-income countries. This reflects new research which indicates that it is dementia, rather than other chronic conditions such as failing eyesight, that will most affect older people and their families as populations age.

This has enormous importance, not only for health policy and practice but also for individuals and families. Carers – often older people themselves – will need more support. Services supporting informal care will need to improve significantly.

The need for action is urgent. Alzheimer's Disease International, in its 2009 report, called for the World Health Organization

and national governments to declare dementia a health priority. The objective of all – international organisations, governments and carers – needs to be the same.

We need to ensure that social support, counselling and education are all made available, improving as far as possible the quality of life of people with dementia and their carers.

Mark Gorman, Director of Strategic Development, HelpAge International

HIV risk for over-50s

Men aged 50-plus in South Africa are recognised as a most-at-risk population group for HIV but their use of condoms and knowledge of HIV remains lower than in other age groups.

These are findings from the latest South Africa national HIV survey, published by the Human Sciences Research Council. The survey includes data on people aged 50-54, 55-59 and 60-plus.

HIV prevalence is 10.4 per cent in men aged 50-54 and 6.2 per cent in men aged 55-59 – well above that of men aged 20-24 (5.1 per cent). For older women, prevalence rates are similar to or higher than those of older men, at 10.2 per cent in women aged 50-54 and 7.7 per cent in women aged 55-59.

Condom use has increased in all age groups but remains relatively low in people over 50, at just under 40 per cent for men and 26 per cent for women, compared with more than 50 per cent in younger age groups. HIV communication to older people has increased from 47 per cent in 2005 to 62 per cent in 2008. However, knowledge of HIV in people over 50 remains low, at 28 per cent of men and 21 per cent of women.

"We are pleased that the survey has analysed data on older people," says Rachel Albone, HelpAge International HIV and AIDS adviser. "The findings indicate that both women and men over 50 are at risk of infection and living with HIV, and HIV communication therefore needs to be better targeted to older people."

South African national HIV prevalence, incidence, behaviour and communication survey, 2008: a turning tide among teenagers?

Human Sciences Research Council, 2009 www.mrc.ac.za/pressreleases/2009/sanat.pdf

Also see:

Lackey D, 'Reducing the risk of infection' in *Ageways* 71, HelpAge International, June 2008, p.7 <u>www.helpage.org</u>

The truth about work



Labouring in Uganda – large numbers of older people have no choice but to go on working. A new report provides startling evidence of how much work is done by older people in poorer countries and the difficulties they face.

Forgotten workforce: older people and their right to decent work, published by HelpAge International, shows that most people in low- and middle-income countries have no option but to work into old age. In parts of Africa, more than 80 per cent of men and 70 per cent of women aged 65 and over are still working for a living.

The vast majority of older people work in the informal sector, in low-paid, unsafe or insecure jobs such as farming, fishing, street vending or domestic work. The working conditions of the poorest older people are often appalling. The report, funded by the European Union, points out that older men and women have as much right as anyone else to decent work and calls for this right to be protected.

Read more: Download the full report or summary from www.helpage.org



China, the country with more older people than any other, is to launch a pilot pension in rural areas. A monthly payment of at least 55RMB (US\$81) will be made to farmers over the age of 60.

The scheme will initially cover 10 per cent of counties, expanding to the whole country by 2020. It will be funded by central and local governments.

Details of the scheme are still not clear, but it appears that farmers who are already over 60 will receive the pension regardless of whether they have paid social insurance contributions. Those who are not yet 60 will be expected to make contributions.

The justifications for the scheme appear to range from promoting economic development to improving the lives of poor older people. Li Guoxiang of the Rural Development Institute Chinese Academy of Social Sciences said: "Peasants have saved a certain amount of money. How to persuade them to consume? The government must guarantee more safety to them."

In December 2009, **Kenya** launched its new poverty-targeted pension scheme (see A&D26). People over 65 in 750 extremely poor households in 44 districts will receive 1,500Ksh (US\$19.40) per month. Payments will be made through mobile phones, post offices or electronic cards.

The pension only covers a small minority of people over 65, about 3 per cent. However, it makes Kenya one of the few countries in the region to have a non-contributory pension and marks a stepping stone towards universal coverage.

In February 2010, the first pension payments were made to senior citizens in the **Republic of Maldives**. All people over 65 will receive a pension, though the amount paid by the government will be reduced for those receiving other retirement income.

At 2,000 Rf (US\$156) per month, this is one of the most generous schemes in the world as a proportion of average income (GDP per capita), similar to those in Kosovo and New Zealand.

Older women still a low priority

Fifteen years after the Beijing Declaration and Platform for Action recognised age discrimination as a barrier to women's empowerment, older women remain a low priority for development, a survey shows.

In 1995, the Beijing Declaration highlighted older women's poverty, health, violence against them, obstacles to entering the labour market, discrimination at work and the effect of armed conflict. Recommendations for government action were made in each of these areas.

But a review of responses to a questionnaire sent out by the UN Division for the Advancement of Women in advance of the Beijing+15 review shows patchy attention to older women. Of 121 countries that responded:

- only 30 included information on pensions for older women
- 19 mentioned older women's health
- 11 included measures to encourage employment of older women
- 6 recognised the impact of ageing on women as a future priority
- 4 mentioned violence against older women
- 2 recognised the lack of data broken down by age and sex as a problem
- 1 made a commitment to collecting disaggregated data.

"The responses tell us that older women are a low priority for most countries and that governments have a long way to go to meet their commitments under Beijing towards them," says Bridget Sleap, HelpAge International rights policy adviser.

The UN Commission on the Status of Women met in New York in March to review progress since Beijing. Recommendations from the meeting include providing universal social protection and collecting agedisaggregated data.

Read more:

www.un.org/womenwatch/daw/beijing15/ national-level.html#res Making noodles in Cambodia – few countries encourage employment of older women, a survey shows.



Nile Sprague/HelpAge Internationa

Calling for a convention

The ten-year review of the Madrid International Plan of Action on Ageing (MIPAA) will be carried out along the same lines as the MIPAA+5 review.

A series of regional meetings during 2012 will culminate in a global review in February 2013. The process was agreed at the 48th session of the UN Commission for Social Development (CSD) in New York in February.

Two recommendations in the UN Secretary General's report to the CSD were not included in the resolution adopted by the CSD. The MIPAA+10 review will not focus specifically on older people's rights, nor has a working group been set up to discuss the most appropriate ways to protect older people's rights.

"The resolution was disappointing in terms of rights," says Bridget Sleap, HelpAge International rights policy adviser. "The door has, however, been kept open for further discussion on possible new human rights instruments for older people and this is a positive step."

Pressure continues from some governments and NGOs for a convention on the rights of older people. At a side event at the CSD, nine organisations – Age UK, HelpAge International, ILC-US, AARP, IAHSA, IFA, GAA, IAGG and INPEA – launched a joint paper, *Strengthening older people's rights: towards a UN convention*, setting out the case for a special rapporteur and convention.

In Latin America and the Caribbean, more than 240 representatives of nine countries met in Chile in October to discuss strategies for achieving a convention.

Strengthening older people's rights: towards a UN convention www.helpage.org/resources

Informal work in central Asia

A survey of informal-sector workers aged 15-75 is being carried out in Kyrgyzstan and Tajikistan.

The study, by HelpAge International and the International Labour Organization with funding from IFKO, aims to gauge the size of the informal labour pool, which has expanded greatly in the past twenty years.

It will investigate the permanence of informal work, projected income

security in old age, access to healthcare of informal workers and their sources of income. It will look at how effective the contributory pension schemes are in each country, given the expanding informal sector. Findings are due in mid-2010.

More information:

Eppu Mikkonen-Jeanneret, Regional Representative, HelpAge International, Eastern Europe and Central Asia Email: eppu@helpageinternational.org

Resilience in Tanzania

A study in rural and urban Tanzania is focusing on the changing healthcare needs and expectations of older people "from cure to care" as increasing numbers are at risk of infectious as well as chronic diseases.

It is being carried out by the Institute of Social Anthropology, University of Basel, Department of Sociology and Anthropology, University of Dar es Salaam, Ifakara Health Institute, Dar es Salaam and the Swiss Tropical Institute, Basel in 2009-2011, funded by the Swiss National Science Foundation.

The study will explore not only old-age vulnerability but also old-age resilience. The aim is to understand why and how some older people are able to make good use of health resources and respond well to health-related risks.

More information:

Dr Piet van Eeuwijk, University of Basel Email: peter.vaneeuwijk@unibas.ch

Snapshot of rural China

Health is a major concern for older people in rural China and older couples care for each other when sick, shows a study from Shaanxi province.

The study of 280 older men and women in 12 villages, carried out by HelpAge International and the Shaanxi Provincial Committee on Ageing in 2009, found that common health worries were strokes, joint pains, stomach problems and high blood pressure.

Most older people interviewed said they relied on their spouses for care when sick (42 per cent). More than a quarter had not visited a village doctor in the past year. Asked why, the most common reason was lack of money (29 per cent).

The study will be used by HelpAge International to improve activities of older people's associations in Shaanxi, with funding from the European Union and Kadoorie Charitable Foundation.

A snapshot of older people's lives in rural Shaanxi, China HelpAge International, 2010 www.helpage.org/resources/briefings

New datasets on health

The World Health Organization has released preliminary datasets on older people's health and wellbeing in six countries.

The datasets from China, Ghana, India, Mexico, Russian Federation and South Africa focus on health, disability, happiness, social networks, economic wellbeing and healthcare. They show that morbidity increases with age in all countries, but that health systems and treatments for diagnosed conditions are not keeping pace. Nevertheless, levels of happiness do not drop appreciably in older age.

The datasets have been produced as part of WHO's SAGE programme which aims to obtain reliable data on people's health and wellbeing; show how people's health and wellbeing changes as they age; improve the reliability of self-reported measures of health; provide data that can be used to monitor the effect of healthcare interventions.

The new datasets add almost 50,000 older respondents to those from earlier studies, so that WHO now has data on approximately 120,000 people aged 50 and older from 70 countries.

The full results of the study, which is funded by the US National Institute on Aging, will be presented by WHO in Geneva, Switzerland in June 2010.

More information:

Paul Kowal, Cooordinator, SAGE, and Scientist, WHO Multi-Country Studies Unit Email: kowalp@who.int





• When an older person in South Africa starts receiving a pension, people in their household take on more paid work. Pension recipients save and invest more, send more remittances and borrow less from banks. In rural areas, large markets spring up on pension days and business in local shops soars. These are findings from USAID-funded research by HelpAge International, EPRI and the Programme for Land and Agrarian Studies at the University of Western Cape.

More information:

Bethan Emmett, social protection adviser, HelpAge International Email: bemmett@helpage.org

• A report from Kyrgyzstan concludes that the current social assistance programme has minimal impact on the lives of older people. It recommends a more sophisticated means of assessing vulnerability and increased levels of top-up. It finds that seasonality, migration and household debt are the three key factors contributing to vulnerability.

Constant crisis: perceptions of vulnerability and social protection in the Kyrgyz Republic

Published by HelpAge International with funding from DFID, is at: www.helpage.org/resources

• Bangladesh has a magnificent history of family support for older people, but with the growth of nuclear families this is breaking down, a new study shows. More than 40 per cent of older people belong to poor households where they often have lowest priority for food, money and medical care. The study by HelpAge International, funded by Cordaid, makes recommendations on social protection.

More information:

Shashwatee Biplob, social protection and policy officer, HelpAge International, South Asia Email: sppo@helpagebd.org

Climate change – learning from older people

Ageing and climate change are two of the biggest issues facing humanity. *Sylvia Beales* argues that older women and men are particularly affected by environmental risk and climate change, they have a unique perspective and must be included in decision-making processes.

In December 2009, world leaders signed up to the Copenhagen Accord, committing governments to setting national targets by 2020 for limiting global warming to below 2°C above pre-industrial levels. Funding was also pledged to support adaptation measures in the poorest countries.

Even though the terms of the agreement are vague, two things are clear: that climate change is acknowledged as "one of the greatest challenges of our time"⁴ and that the issue is now firmly on the agendas of the highest level of government.

Nevertheless, it is doubtful that these pledges will suffice to limit warming to below 2°C. It is also clear that, to date, debates on climate change miss out the people most affected by the extremes in weather that are indicative of climate change. Among these are growing numbers of older people who are struggling to cope with harsher floods, drought, cold, failed crops and other effects of extreme weather.

We have seen how older people in affluent countries are disproportionately affected by weather-related emergencies, such as the recent heat waves in France, Hurricane Katrina in the USA and floods in Cumbria, UK. For the growing numbers of over-60s in the poorest countries, the impact of extreme weather is already catastrophic.

Unpredictable weather

In 2009, HelpAge International conducted interviews with older men and women in nine countries – Bangladesh, Bolivia, Ethiopia, India, Kenya, Kyrgyzstan, Mozambique, Tanzania and Zimbabwe – to find out their experience of climate change.

In all nine countries, older people described changes in rainfall patterns, seasons, water sources, rivers, the land and agriculture. They spoke of less predictable rainfall, more frequent and longer droughts, more floods, more frequent and stronger storms and more extremes of weather, including heat waves and colder spells.

Even small-scale disruptions could have a significant impact on individual households. In Ethiopia, older people said they were going hungry because there was less food and it was more expensive, due to progressively declining crop yields and loss of pasture. Deaths of animals due to drought had led some older people to sell their assets. Some reported that they had lost their status in the community as they had become poorer.

Older people told us that the traditional knowledge they and others relied on to predict weather patterns was less useful than in the past. Signs they looked out for, such as the movement and position of the sun and moon, and the behaviour of trees, birds, animals and insects, were changing.

In some cases, older people's inability to predict the weather placed them in danger. In some communities, older people were accused of being witches and were blamed for unexplained changes in weather patterns.

"The weather has changed a lot. In our time there was the cultivating season, the rainy season, time for sowing and harvesting, but now it can rain, we sow our seeds, we get so far, then the rain stops and everything dries."

Older woman, Mozambique

Serious health risks

The Lancet has called climate change "the biggest health threat of the 21st century".⁵ It has identified a series of climate-related threats, including changing patterns of disease, water and food insecurity, extreme climatic events and population growth and migration. As a result, inefficient and under-funded primary healthcare systems in poorer countries will be under added pressure brought on by the health implications of a warming climate, it reports.

These changes will have a direct impact on older people in developing countries. Age-related factors, such as physical weakness, declining health and A farmer in Bolivia, where older people are contributing their knowledge of environmental changes and means of adaptation. g

uncertain income can make older people more vulnerable to the impacts of a harsher climate.

Extremes of hot and cold pose serious risks for older people. Heat waves are particularly life-threatening for older people, especially for those with heart conditions.

Increasing prevalence of malaria and other vector-borne diseases including dengue will affect frail older people who are not protected from mosquitoes by bednets. Similarly, increasing food and water shortages are likely to worsen older people's already precarious health status.

Recent research in communities populated by vulnerable older people and grandchildren in Kyrgyzstan shows how the vulnerability of these families is exacerbated by seasonal cold.⁶

Older people and small children are especially at risk of illness during the winters, which last for several months, with temperatures routinely falling below -15°C, because of their weaker immune systems. Energy shortages make it hard for older people to heat their homes.

Bridging knowledge gaps

The interviews with older people highlighted gaps between traditional and scientific knowledge and practice. Older people voiced frustration at their lack of scientific knowledge. They said this



Ageing and climate change

- The demographic transition from young to old means that by 2050 there will be more adults over 60 than children under 14.¹ This transition is happening most rapidly in the developing world.
- Temperatures are predicted to rise globally by at least 2°C by 2050.²
- A 2°C rise means that 375 million people could be affected by climate-related disasters by 2015.³
- Rising temperatures will bring about a 28 per cent increased exposure to malaria alone.
- The poorest people, including significant numbers of older people, will be worst-affected.
- Older people have experience of weatherrelated hazards and can offer valuable insights.

limited their understanding of what was happening, what might happen in the future, what the causes of weather changes were and what insights and practical action they could offer.

The study also highlighted the importance of involving older people in exploring adaptive measures and understanding the risks posed by climate change.

In some cases, older people are contributing to research on climate change at the local level. Some researchers say that the experience of older people who have stayed on the land and who can compare past and present should be combined with scientific research to develop a grounded opinion on whether it is climate change *per se* that is changing environments.

For example, in Bolivia, older people have a good deal of knowledge on environmental changes and means of adaptation. Together with Oxfam and Save the Children, Help Age International's partner Fundación para el Desarrolo Participativo Comunitario (FUNDEPCO) is working with the Chimani ethnic group in the Bolivian lowlands, who are affected by flooding, to collect local knowledge on adaptive strategies. They are placing a special emphasis on traditional bio-indicators such as birds' nest-building sites which can indicate whether there is dry or wet weather ahead.

In India, there is a growing consensus that older people can contribute traditional wisdom and memory of climatic patterns. In Rajasthan and other drier parts of India, migration resulting from monsoon failure and drought has led to care of children falling on older people. Although older people are generally poor, they are becoming climate leaders, leading their communities towards adaptive measures.

For example, older women are encouraging farmers to use traditional millets and drought-resistant grain in order to conserve water and fuel. Communities are conserving water by using traditional systems such as *nadis* – old reservoirs that had silted up – and *khadins* – embankments to hold run-off water.

Message to policy makers

Older people want to be included in community work, debates and training on climate change adaptation. They are convinced that, at local level, their input could improve understanding of climate change by vulnerable communities, help dispel myths and ease pressure at difficult times. They also feel that, at national level, older people's groups should participate in forums and debates and contribute to decision-making processes on adaptation. In view of older people's insights and interest in climate change, HelpAge International recommends that:

- Older people and their representative groups should take on an equal and active role in relevant national forums, financing bodies and decision-making processes on climate change.
- Guidelines for the Adaptation Fund should make provision for older citizens to input into programming and policy dialogue, build older people's resilience and make funding streams accessible to older citizens.
- Data and priorities for adaptation strategies and vulnerability assessments should be broken down by age and sex.
- Adaptation programmes should ensure consultation with older people on programme design and finance; include health system strengthening to respond to the requirements of ageing populations; provide for social protection coverage for older people and their dependants; support older farmers to diversify crops, livestock, credit, land retention and land use.
- Predictable, accountable financing for climate change adaptation should be additional to existing pledges for development aid.

This article is taken from *Witness to climate change: Learning from older people's experience,* HelpAge International, 2009, written by Sylvia Beales and based on studies by Tavengwa Nhongo and Costanza de Toma; and 'Harvesting the wisdom of seniors in adapting to climate change in India', by Mathew Cherian and Indrani Rajadorai, HelpAge India, unpublished paper, 2010

Sylvia Beales is Head of Strategic Alliances, HelpAge International, London Email: sbeales@helpage.org

Read more:

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HIV/AIDS and older persons: shifting the focus from the infected to the affected* *Williams N et al*

The role of parents and family members in ART treatment adherence: evidence from Thailand* *Knodel J et al*

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Socioeconomic differentials between HIV caregivers and noncaregivers: is there a selection effect? A case of older people living in Nairobi city slums* *Chepngeno-Langat G et al*

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* Free access on the web

HelpAge International helps older people claim their rights, challenge discrimination and overcome poverty, so that they can lead dignified, secure, active and healthy lives.

Ageing and Development aims to raise awareness of the contribution, needs and rights of older people and to promote the development of laws and policies supporting older people.

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Editor: Celia Till Email: ctill@helpage.org

HelpAge International PO Box 32832 London N1 9ZN, UK

Tel: +44 20 7278 7778 Fax: +44 20 7713 7993

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