

Annual report and financial statements

2014/2015



**HelpAge
International**

age helps

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“While I do not believe we own all the wisdom, given the time that we have been living, we have comparatively greater experience that we can draw on in disasters. So I think it is imperative that older people are involved, not just as recipients, but in planning. The experiences we have had can help to make things easier.”

Salvacion Basiano, 75, past president, Coalition of Older Persons Association of the Philippines

Annual report and financial statements to March 2015

The Trustees present their annual report, including their strategic report and the audited accounts.

Our objectives and activities

This year in review marks the end of our five-year *Strategy to 2015*. Our report this year will therefore reflect on both the achievements during the life of our *Strategy to 2015* and our results for the year 2014/2015.

The work of HelpAge International takes place in the context of a world where population ageing is occurring in nearly every country as a result of increasing longevity and declining fertility.

In 2011 the global population passed 7 billion, and we can anticipate a world population of nearly 10 billion by 2050. One key population group is changing more rapidly than any other. For most of human history the world has been predominantly young, but today's over-60s are the world's fastest growing population group. Globally, the number of people aged 60 years and over may increase from 901 million today to more than 2 billion by 2050 – over 1 in 5 of the world's population. Much of this growth is taking place in low- and middle-income countries, where 7 out of 10 of the world's over-60s live today.

Over the past five years we have continually highlighted the urgent need for policy to recognise the valuable contributions that older people make to society. We have stressed that policies and programmes to support people at all stages of life are needed, including in older age.

Our *Strategy to 2015* sets out five objectives:

- **Global action 1:** Enabling older women and men to have a secure income
- **Global action 2:** Enabling older women and men and those they support to receive quality health, HIV and care services
- **Global action 3:** Enabling older women and men to actively participate in, and be better supported during, emergency and recovery situations
- **Global action 4:** Building global and local movements that enable older people to challenge discrimination and claim their rights
- **Global action 5:** Supporting a growing global network of organisations to improve their work with and for older women and men.

This strategic report sets out what we aimed to achieve and our progress both during this year and over the past five years.

This report also outlines the principal risks to the organisation and how they might affect our future prospects.

Our vision is a world in which all older people fulfil their potential to lead dignified, active, healthy and secure lives.

We work with our partners to ensure that people everywhere understand how much older people contribute to society and that they must enjoy their right to healthcare, social services and economic and physical security.

Strategic report

The year in review



Toby Porter
Chief Executive Officer

I saw for myself when I visited Pakistan in December 2014, how involving older people in emergency preparedness drills is simple, often highly enjoyable and, most importantly, can save the lives of those most at risk: older members of the community.

Extreme weather events have long been proven to have a disproportionate impact on older people. When Hurricane Katrina struck New Orleans in 2005, 75 per cent of those who died were 65 and over, despite this age group comprising only 16 per cent of the local population the day the levees broke. A similar pattern was seen in the loss of life to the Japanese Tsunami of 2011. It's the same story the world over. If you are caught up in a natural disaster, your chances of not surviving increase significantly as you get older.

In the light of such statistics, it was encouraging and significant that older women and men were the focus for the International Day for Disaster Reduction, organised by the United Nations, and celebrated on 13 October 2014. Older people need to be a far higher priority for the plethora of disaster risk reduction programmes being run across the world by governments, international organisations, and their national and grass-roots partners.

Saving lives has also been perhaps the key goal of global humanitarian assistance for decades. Yet, incredibly, one of the most widespread causes of avoidable death and disability in people still goes undiagnosed and untreated in so many emergency settings – hypertension, or high blood pressure. Worldwide, high blood pressure is estimated to cause 7.5 million deaths, about 12.8 per cent of the total of all deaths, and the risks increase significantly with age.

One of my proudest moments this past year was visiting a basic health clinic in the suburbs of Beirut in January, and speaking to two women from Syria, who had been

refugees there for almost three years. Since HelpAge started to support this clinic in late 2013, these two women had seen their hypertension diagnosed and treated for the first time. Their doctors were extremely pleased with their improved readings. But why weren't these basic services available routinely for older people in health clinics across Lebanon, and Jordan? Literally billions of dollars have been spent on humanitarian assistance programmes, and the risk factors for older Syrians for hypertension and other common conditions such as diabetes were known to be high.

It is hard to escape the conclusion that it is unwitting age discrimination that prevents older people from playing a prominent role in everyone's disaster risk reduction programmes, or offered routine testing and, where necessary, treatment for their high blood pressure in refugee camps and other emergency settings. Other age cohorts do not seem to face these challenges.

This is why we have called for a UN Convention for the Rights of Older People since 2008 and why this will remain HelpAge's key global advocacy goal over the period of our new Strategy to 2020. This call has always been based on the very simple premise that an older person has the same rights as any other person, but that age discrimination continues to shape not just attitudes to older age and older people, but also the treatment they receive in so many aspects of their lives.

We are all proud of what the staff and partners of HelpAge have achieved this past year for older people. We directly reached 850,000 of the world's poorest or most vulnerable older people and their families over the past year, with essential services such as healthcare, income generation, and emergency response. We worked in close partnership with more than 6,350 older people's associations active in their own communities. We are also reporting a record income this past year of £29.1 million, a sure sign that governments around the world are responding positively to our influencing agenda and recognising that HelpAge can deliver quality programmes that represent good value for money. We are grateful to our key strategic partners – Age International, the Swedish International Development Cooperation Agency, EuropeAid and the UK Department for International Development, and to the now 114 organisations around the world that are part of the HelpAge global network.

This was the last year of our Strategy to 2015, and it gives me special satisfaction that, inside this year's report, you will see measurements and targets that provide clear evidence that we have exceeded the majority of the targets we set, not just this year, but over the entire strategy period.

I want to end with a personal word of thanks and tribute to Cindy Cox Roman, who is stepping down as Chair of HelpAge International in November 2015, after serving her full eight-year term on our Board. She will be succeeded by Arun Maira. Cindy has been a wonderful Trustee and a hugely impactful, energetic and accessible Chair, visiting programmes and meeting staff and partners around the world.



Toby Porter



Cynthia Cox Roman
Chair of the Board of Trustees

This year's HelpAge International Annual Report is a bittersweet one for me. There is so much to celebrate in our achievements and our impact over the past year, but it is also the last one that I will be serving as Chair of the Board of Trustees, a position that I have been so honored to hold since 2012, having joined the Board five years earlier.

Over the past eight years on the Board, I have watched with pride and admiration at how HelpAge International has matured and developed as an organization. We have visibly increased both the impact and the scope of the programs we deliver for older people around the world, and the ambition of the policy and influencing work that we carry out on their behalf.

This past year, we have directly reached a greater number of older people than ever before. Our humanitarian teams are saving lives and bringing comfort and material assistance to women and men caught up in truly terrible situations in their later years – this year, we have stepped up our work in the refugee camps around Syria, in Ukraine, in South Sudan. I am so proud of the staff and partners whose courage and commitment allows us to work in these environments.

We are in the midst of a change due to the rapid aging of the world's population. By the year 2050, there will be more people over 60 than under 15 years of age. Most of these older people will live in developing countries, a fact that even now seems to take national and international policy makers by surprise. Some of our most influential regional and country programs, such as those in Asia, Latin America and Eastern Europe are already working exceptionally closely with governments, regional bodies, academic institutions, and civil society to shape that future.

The calls by HelpAge International and our partners at the United Nations for a set of global Sustainable Development Goals that are meaningful for all age groups seem to have fallen on fertile ground. Our Global AgeWatch Index, which we first published in 2013, is now well established as the only index comparing countries from best to the worst to grow old in, and stimulating energetic and often passionate national debates about the specific situations facing older people from country to country.

I am leaving an organization and a global network that I genuinely believe is altering how global citizens and institutions regard and treat older people. These changes are setting in motion an interplay of health, financial, and social/psychological outcomes that benefit individuals, communities, and nations alike. I take with me memories for a lifetime – stories heard and lessons learned from some of those I have been fortunate enough to meet – an older farmer in Peru grappling with climate change, a grandmother in Tanzania caring for nine grandchildren, or an older woman in Vietnam starting her own business. Despite the progress we have all made, there remains much work to do.



Cynthia Cox Roman

Global action 1: Enabling older women and men to have a secure income

Our vision is for all older people to have a secure income.

What did we want to change?

We wanted governments to ensure that all older people receive at least a basic pension. Pensions are an essential part of achieving financial security in older age. For the poorest, social (non-contributory) pensions provided by the state are the most effective way to achieve this. We also wanted to make sure that older people who want or need to go on working should have access to decent work and the opportunity to be productive.

How are we doing this?

- **We made the case for social pensions** to governments, donors, regional bodies and the United Nations (UN) by building and sharing evidence on how to improve the design, implementation and impact of social (non-contributory) pensions.
- **We provided technical training and support to governments** to improve existing social pensions and strengthen transparency and accountability in their delivery.
- **We supported older people and civil society** to lobby at national and international level for new or improved pensions and cash transfers, and to monitor the delivery of existing schemes.
- **We protected and improved older people's livelihoods** by providing income-generating and rural development activities, vocational and business training, and working together with older people and our partners to mitigate the impact of a changing environment.
- **We produced evidence of the key income security issues** we believe governments and other agencies should be addressing.

What have we achieved since 2010?

Against our targets

An additional 6.6 million older people in 13 countries are eligible for a social pension or benefit for the first time, worth a total of £1.6 billion a year.

- New social pension schemes were introduced in Peru, the Philippines and Zanzibar.
- Improved schemes were approved in Colombia, Ecuador, Kyrgyzstan, Mozambique, Thailand and Vietnam.
- The groundwork for new schemes has been laid in Ethiopia, Myanmar and Tanzania.

Technical support on social pensions was provided to 26 governments.

Our programmes supported over 200,000 older people to develop or protect their livelihoods or food security.

Important milestones

Our Pension Watch website and briefings provided evidence of the impact of social pensions as a means of poverty reduction in old age. We made the case for the role of social pensions as an effective tool in creating a minimum package of social security for all ages.

Our Global AgeWatch Index analysed the state of older people's income security in 96 countries, while our Insight Report 2014 focused on the role pensions and social pensions play in income security.

We produced evidence and analysis on key income security issues, including:

- *Ageing of Rural Populations (2014)* analysed the situation of older farmers and their contribution to national food security in developing countries.
- *Ageing and Financial Inclusion (2015)* demonstrated the discrimination that older people face in accessing financial services and the role social pensions can play to improve this.
- *Forgotten workforce: older people and their right to decent work (2010)* explored why older people in low- and middle-income countries work, the types of work they do, and the issues they face in achieving a secure income.
- *Strengthening state-citizen relations in fragile contexts – the role of cash transfers (2011)* used examples from Kenya, Sierra Leone and Sudan to highlight the significant role that cash-transfer programmes play.

Global action 1

Measuring our progress: We will enable older men and women to access a secure income

Our indicators	Delivered in 2014/2015	Growth or change on 2013/2014	Key changes	Our targets for <i>Strategy to 2015</i> (2010/2015)	What was achieved by March 2015
Target for 2015: 20 per cent more older men and women in 30 low- and middle-income countries are receiving state non-contributory pensions or benefits					
Number of countries where HelpAge provides technical assistance to governments on social protection (pensions/benefits)	10 countries	1 new countries	New initiative in Nepal to integrate social pensions into a revised Senior Citizens Act	26 countries supported since March 2011	26 countries
Value and coverage of new or improved social protection schemes (benefits/pensions)	–	£528 million to 1.8 million more older people	Significant growth in Latin America and East Asia. New schemes were approved in Ethiopia, Myanmar and Zanzibar where our support for implementation continues	£1.23 billion more per annum to 6.1 million older people (above March 2011)*	£1.57 billion to 6.58 million more older people
Target for 2015: Households containing older men and women experience sustained improvements in their income and food security in 25 countries					
Number of older people's associations (OPAs) involved in income-generating work	4,400 OPAs with 98,000 members	2,115 more OPAs, with 47,000 more members	Significant growth due to new programming in India (50% of total). Myanmar, Tanzania, the Philippines saw moderate growth	8,300 OPAs with 223,000 members supported	7,900 more OPAs, with 209,000 more members
Number of older people working to reduce shocks (disaster risk reduction, seasonal poverty, drought, etc)	46,000 older people with 53% women	41,000 more older people with 54% women	Growth in nine countries, notably Bangladesh, Kenya, Myanmar, Pakistan and Vietnam. Growth lower than expected in Ethiopia and Sudan	310,000 older people supported, with 57% women	254,000 older people with 56% women
Number of older people getting new access to financial services	134,000 older people with 59% women	122,000 more older people with 55% women	Significant growth in India and Kenya, through access to community savings and loans schemes, and access to commercial banking services respectively	116,000 older people supported, with 61% women	213,000 older people with 61% women

* Our target was revised in March 2014 to reflect slower change than anticipated in several countries

What did we achieve in 2014/2015?

Our target for pension coverage exceeded our forecasts – 30 per cent higher growth than last year. New schemes were approved in Ethiopia, Myanmar and Zanzibar. Efforts to see a universal social pension in Tanzania continued to meet political obstacles and we have yet to achieve a substantial engagement in Kenya. The level of technical assistance we provided to help governments design and deliver their schemes was as expected.

Our targets for supporting older people in livelihood and resilience programmes were not met, with anticipated funding levels in six countries not realised. Community-based work grew significantly in new programmes run by network member HelpAge India, and in our work in Myanmar. New *Community-based Disaster Risk Reduction* and resilience frameworks to support the improved design of future programmes may help to address this. The diversity of our livelihoods work continues to be locally appropriate, but a challenge remains to achieve better inclusion of older people in the livelihood, food security and employment policies and programmes of governments or other agencies.

We reinforced our position as a global voice on income security in later life. A major event in Germany on pension and social pension models, a report and events highlighting older people's exclusion from commercial financial services, and our *Global AgeWatch Index Insight report* on income security all promoted new concepts on the role of social pensions and financial inclusion as effective means to enable older people to invest in their livelihoods and wellbeing.

Better pensions and benefits

Together with our global network of Affiliates and partners, we continued to influence governments, the UN and donors to address the issues of ageing and social security. As a result, several governments adopted new or improved pensions or benefits schemes this year. For example:

Colombia

The *Colombia Mayor* cash transfer programme for vulnerable older people continued to increase its coverage from 1,250,000 to 1,500,000. There is also evidence of improvement in the programme's targeting of recipients through closer discussion with local civil society organisations, including our partners.

Ethiopia

A draft National Social Protection Policy was approved, including provision for a new social pension scheme. We continued a pilot social cash transfer scheme in Tigray as part of our efforts to support the government to design and introduce a new national scheme.

Myanmar

As part of the development of the National Social Protection Strategic Plan, the government allocated £325,000 to begin providing a social pension to people aged 90 years and over from the national budget in 2015/2016. A one-off payment by the President was awarded to 500 older people aged 100 years or older.

Mozambique

The National Basic Social Security Strategy was revised with an increase in the funding allocated to its social cash transfer programme. This cash transfer programme reached 340,000 households this year, a 10 per cent increase, with 80 per cent of these households being older people-headed.

The Philippines

The budget for the national social pension was increased by 90 per cent and the age of eligibility lowered from 77 years to 65 years, doubling the number of recipients to 940,000 older people. The targeting system for identifying recipients was also improved, allowing communities a greater role in nominating potential recipients and monitoring delivery.

Uganda

The government expanded its Social Assistance Grant for Empowerment programme to an additional new district, enabling an additional 5,000 older people to receive monthly payments. The government also committed £1 million to support the further expansion of the programme in 2015/2016.

Zambia

A new Zambia National Social Protection Policy Framework was adopted. It includes protection of the livelihoods and basic needs of older people, as a result of advocacy and inputs by our Affiliate the Senior Citizens' Association of Zambia.

Zanzibar

The Zanzibar Social Protection Framework was approved, including provision of a monthly pension for people 70 years and above. The first phase will reach 27,000 people, and subsequent phases will include lowering the eligibility age to 60 by the year 2020.

Technical support to governments

Many governments are still not prioritising pensions and benefits to older people, believing that such schemes are neither affordable nor effective in reducing poverty. To address these challenges, we built and shared evidence of the impact and affordability of social pensions. We also advised and trained governments on the design of new programmes and on how to improve existing schemes.

Since 2010, we have supported 26 government ministries in this way. Examples of our support to governments around the world include the following:

Bangladesh

We contributed to the implementation of the National Strategy for Social Protection, providing evidence and proposals to support a new five-year action plan. Our assistance included developing a plan for capacity building of government and other agency staff. We presented research results on options for improving old age income security, demonstrating the impact of social and income security for older people at household level through increasing access to the Old Age Allowance.

Myanmar

HelpAge became the lead civil society agency for developing the National Social Protection Strategy and sponsored an exposure visit for the Minister of Social Welfare to the UK with the support of Age International and Age UK. We commenced a new feasibility study on the technical options for a universal social pension.

East Asia

As part of our regional approach to promoting greater attention to pension schemes, we ran two key training events. First, in partnership with the International Labour Organisation (ILO), we ran an executive training course for government staff from 10 countries on designing and extending universal pension systems in Asia and the Pacific. We also continued our annual training course *Designing and Implementing Social Transfer Programmes* in collaboration with the Economic Policy Research Institute, the Maastricht School of Governance and the Institute of Development Studies. Nearly 100 participants from 16 countries attended.

Supporting civil society networks

We support older people and local organisations to effectively influence governments and to raise public awareness on ageing issues. HelpAge supported civil society partners and older people's associations in 25 countries this year to help their governments deliver better pensions, benefits and livelihoods programmes for older people. These initiatives included the following:

The Philippines

Through support from our regional civil society capacity building programme, our Affiliate the Coalition of Services of the Elderly was able to support lobbying by older people's representatives in meetings with the government. They presented position papers on gaps in the implementation of the social pension scheme and participated in government consultations on "bottom up" budget planning for social welfare schemes. Their work was key to the changes approved by the government in the delivery of the national social pension scheme.

Serbia

With our project partner Red Cross of Serbia and the HumanaS network, we worked to improve the government system for licensing and tendering for social services provided under the Law on Social Protection. Project partners lobbied government nationally and in local municipalities to fill existing gaps in minimum standards in service delivery and for older people to have greater access to community-based social services countrywide. Awareness raising by partners and older people's groups resulted in 1,250 older people accessing existing poverty alleviation benefits, pensions and cash transfers.

Colombia

Our partner, Red Colombiana de Envejecimiento Activo y Digno, was supported to double its network of older people's departmental councils to eight. This network received training that built technical knowledge on social pensions and better capacity to influence public policy. As a result it was able to convince a parliamentary committee to support improved social protection for older people.

Ethiopia

The new National Social Protection policy was approved through our technical training and support of the advocacy efforts of the National Social Protection Platform. Additionally, the Platform has engaged with the government in the design of urban and rural safety net programmes to allow adoption and implementation of these programmes by government once direct donor support ends.

Improving and protecting older people's incomes

Many older people in developing countries continue to work well into older age. For some, this is by choice; but often, lifelong poverty, a lack of savings and the absence of a pension mean they are forced to continue working. This year, older people improved their livelihoods in 20 countries through our income-generating activities and training, which we delivered through 4,400 older people's groups and associations.

Supporting older people to protect their incomes and livelihoods from shocks (drought, floods, conflict and other risks) continues to be a key focus of our work, and this year we helped 46,000 older people across 17 countries to improve their resilience to crises. We ran schemes such as group savings and revolving loans or helped individuals or groups to open a bank account. This support gave 120,000 older people in 18 countries the ability to save, access money in times of crisis, and invest in and manage their own income-generating activities. Examples of this practical work include the following:

Myanmar

We provided food security and livelihood support to 25,000 people through training and practical support under five programmes run this year. Older People's Self-Help Groups managed revolving loan fund initiatives in which 7,200 older people and their families participated. Following special briefings run for community leaders on gender equality, women's participation in project planning and implementation increased from 45 to 58 per cent this year.

Sudan

We continued to rebuild the livelihoods of 1,000 older people-headed households in West Darfur with our partner Pioneers for Peace and Development Organisation and older people's committees. We ran a programme of training and support for animal husbandry, diversifying and improving agricultural production and environmental protection activities. We also trained 50 members from 38 Crop Protection Committees in disaster risk reduction and peace building, conflict resolution and negotiation skills.

Uganda

Affiliate Uganda Reach the Aged Association, new partner Caritas Gulu and three government district administrations worked with us in three districts in Northern Uganda to form and support 142 older people's groups with a total of 4,260 members. Support to new Village Savings and Loan Associations focused on animal husbandry activities – pig, goat and rabbit rearing. Funds were allocated from government district budgets and the partners trained and supported 2,000 older people, mostly women, to run savings and loans schemes and to lobby for financial services.

Kenya

We supported and trained 164 Rights Committees, in each of which older people made up to one-third of the membership. The committees implement a community complaints and grievances mechanism for the major donor/government-funded Hunger Safety Net Programme. This programme supports 100,000 households – most containing older people – to receive regular cash transfers. The programme introduced a disaster risk reduction component to its work this year, in which cash transfers can be increased in periods of crisis. We have worked to ensure that 85,000 households now have a bank account so that older people can access financial services, particularly to save securely.

Influencing regional and international bodies and donors

Changing the attitudes and practice of key international and regional actors is an essential part of our work to ensure that older people's needs and ageing issues are reflected in aid policy. We communicated key evidence and data on income security through our Global AgeWatch Index, the Pension Watch website and in our media and online work. Sustaining our visibility through international events, production of technical papers and building media coverage directly supports our ability to engage effectively and frequently at national levels. Our Global AgeWatch Insight Report focused on income security in old age this year, looking at how different countries respond on this issue, particularly by extending pension coverage. This report was distributed in 80 countries, supporting the visibility of our work.

A flagship international event entitled “Thanks, Otto!” – a conference to mark the 125th anniversary of the introduction of social pensions in Germany – looked at the history of the German social pension, the impact it has had on pension policy, and explored the need to develop new models that respond to the realities of the world today and into the future. Supported by our Affiliate HelpAge Deutschland, we built our relationship with the German government, as well as with the World Bank and the international insurance company Allianz. Such events create opportunities with influential partners, such as UNFPA, with whom we agreed new research collaborations over the next four years on income security in Asia.

Ageing and Financial Inclusion: An opportunity, a joint publication with the Center for Financial Inclusion at Accion and in partnership with financial service provider MetLife, studied the intentional and unintentional discrimination older people face in accessing financial services. The inability to hold a bank account and take out loans or insurance often prevents older people from investing in personal livelihood opportunities.

Global action 2: Enabling older women and men and those they support to receive quality health, HIV and care services

Our vision is for older people to receive quality health and care services, and to be included in the response to HIV and AIDS, whether they are at risk of infection, living with HIV or caring for others affected by HIV.

What did we want to change?

We wanted to convince policy makers of the serious implications of population ageing for health systems and persuade them to include older people explicitly in key policies and programmes, so that they ensure older people's right to health is met. We wanted older people to enjoy better health by having good access to appropriate, affordable health, HIV and care services.

How did we do this?

- **We delivered and developed models and standards for health, HIV and care services** for older people and those in their care. We focused on improving access to age-appropriate primary health services, better nutrition, HIV prevention and treatment services, and implementing community, home-based and self-care initiatives.
- **We trained health, HIV and care providers** so that they can deliver better services for older people. Much of our training targets basic- and mid-level health professionals and community volunteers.
- **We lobbied for changes in government policy and practice** to recognise, finance and implement adequate responses to older people's health, HIV and care issues. We campaigned every year on World Health Day for such action in our Age Demands Action for Health campaign.
- **We raised awareness among international and regional policy makers** on older people's health and care issues. We focused on preparing and contributing to the World Health Organization's (WHO) World Health Report 2015, which will focus on ageing and older people's health.

What have we achieved since 2010?

Against our targets

An additional 2 million older people in 22 countries have improved access to health services. Our work helped 170,000 older people to receive better community care.

Significant changes in national policy enabled older people to access free or subsidised services in the Philippines, Tanzania and Vietnam.

We trained 9,000 government health staff in 20 countries to deliver age-friendly services and to diagnose and treat older people's health issues better. National health staff training curricula were improved in Cambodia, Mozambique and Tanzania.

We influenced UNAIDS to review its strategy and data collection and, for the first time, to report annually on the prevalence of HIV in people aged 50 and over. National HIV-related policies were improved in Ethiopia, Kenya, Mozambique, Tanzania and Uganda – the policies and their action plans include better support for older people.

We began developing a new field tool to assess the effect of health and care interventions on the health and wellbeing of older people. The tool will enable us to better understand how to improve support for older people.

Important milestones

Our models of home-based care influenced the practice of government in Cambodia, Malaysia, Indonesia, the Philippines and Tanzania.

We developed a broad range of publications and reports, both practice and policy focused, including the HIV and AIDS peer education manual for older people, and a brief on hypertension and older people.

The East African Community and Southern Africa Development Community recognised the role older people play in the care of orphans and vulnerable children – around half of whom are cared for by grandparents in Africa – and improved their HIV-related policies.

Partnerships with leading agencies, including WHO, Alzheimer's Disease International and Handicap International, advanced our work on non-communicable diseases (NCDs), mental health and data collection and analysis. We contributed to the debate on target-setting relating to older people and NCDs, in the period from the UN High-Level Meeting on NCDs in 2011 to the finalisation of the health-related target in the Sustainable Development Goals (SDGs).

Global action 2

Measuring our progress: We will enable older men and women and those they support to access quality health, HIV and AIDS and care services

Our indicators	Delivered in 2014/2015	Growth or change on 2013/2014	Key changes	Our targets for <i>Strategy to 2015</i> (2010/2015)	What was achieved by March 2015
Target for 2015: Older men and women in 15 countries can prevent and manage chronic illness					
Number of countries where we train and support health professionals to better support older people	8 countries	2 new countries	New initiatives in Bangladesh and Sudan on mental health and nutrition	18 countries supported	20 countries
Target for 2015: Older men and women in 20 countries receive guaranteed free access to age-friendly health services					
Number of older people reporting increased access to health services	1.41 million older people with 59% women	738,000 more older people with 59% women	Most significant growth was achieved in the Philippines, with the introduction of a new health insurance programme for older people. Notable growth in access to government services also in Ethiopia, India, Myanmar and Tanzania	1.38 million older people, with 61% women	2 million older people with 64% women
Target for 2015: Older men and women in 12 countries receive appropriate HIV and AIDS services					
Number of countries where we are working to increase access to antiretroviral treatment or support services for older people and family members living with HIV	7 countries	2 countries	Partners in Zambia and Zimbabwe supporting actions to ensure the implementation of South African Development Community HIV and care guidelines	8 countries supported	9 countries
Target for 2015: Older men and women receive a range of appropriate primary healthcare services in 25 countries					
Total number of older people with improved access to community-based care	51,000 older people with 67% women	37,000 older people with 66% women	Notable growth through service provision and carer training in Ethiopia, Colombia, Myanmar, oPt, Serbia, Sudan, and Zambia	154,000 older people supported, with 60% women	169,000 older people with 68% women
Number of older people reporting improved health status (due to improved access, service delivery, self-care, improved income, etc)	452,000 older people with 58% women	205,000 more older people with 59% women	Based on data from 23 countries. Health status data is correlated to improved access to health services. Strongest growth has been in the Philippines and Tanzania	699,000 older people, with 60% women	735,000 older people with 64% women

What did we achieve in 2014/2015?

We exceeded our targets for the number of older people receiving quality health, HIV or care services with 1.4 million older people reporting better access to health services. A new government health insurance scheme in the Philippines and strong accountability work in Tanzania were significant contributors.

Service delivery continues to be significant in our health work, with over 120,000 older people supported across 26 countries. This work has enabled us to build relationships with governments and academic institutions to improve clinical training courses. Work on NCDs and mental health grew, with further new partnerships developed. Community-based care outreach targets were met due to growth in older people supported in six countries. However, challenges remain, including in scaling up access to care for older people by strengthening formal support systems and working towards the integration of health and care services. We are finalising a global review of our work in care to inform future work.

We continued to test our health outcomes tool, developed in collaboration with pharmaceutical company Pfizer in Latin America, which assesses changes in the health status of older people. This year, we have begun using the new tool in four African countries. We continue to develop the way we frame health and wellbeing in older age with a greater emphasis on the need to maintain function.

We contributed to the forthcoming WHO World Health Report. We also maintained our focus on improving the health, HIV and care data available from developing countries to inform policies and responses. We achieved progress with UNAIDS and WHO, but proposed changes to the US government-funded Demographic Health Survey, to include people aged 50 and over, continued to meet obstacles. Our work in this important area continues.

Changing government policy and practice

For our work to be effective and have lasting impact, we helped governments improve their health and care policies and infrastructure to better support their older populations. We worked hard to persuade governments to increase the number of health professionals with the appropriate skills to provide quality care for people in older age and address the health challenges they face. This year, we provided training to health staff in 12 countries, with new initiatives in Bangladesh and Sudan. These were designed to support the delivery of existing government commitments and to encourage their interest in new initiatives, particularly on mental health and nutrition.

Some of our key successes include:

The Philippines

The Universal Philippines Health Insurance for Senior Citizens (PhilHealth scheme) was enacted following significant dialogue between government and our Affiliate Coalition of Services of the Elderly and its partner Coalition of Older People's Associations of the Philippines. This law entitles all older people aged 60 and over to free enrolment onto the scheme and free health check-ups and necessary treatment. Two million older people have registered onto the scheme since November 2014.

Myanmar

WHO and HelpAge supported the Ministry of Health in 2013 to develop a 10-year strategic plan for older people's health. Implementation of this plan commenced this year in 73 townships, and 1.15 million older people received healthcare services through weekly health clinics for older people. Our homecare model continued to be implemented through the eight National Homecare Project Advisory Committee member organisations, a coalition of national and international NGOs, who provided homecare services to 12,600 older people this year.

Tanzania

We successfully influenced a number of national policy development processes. The new 2015-2020 Health Sector Strategic Plan commits to improve health service provision for people aged 60 and over in public health facilities. The plan commits to developing clinical guidelines in geriatric medicine, including specific geriatric training in the curriculum of health professionals and the introduction of postgraduate training in Geriatric Medicine. The National HIV and AIDS Policy now has specific objectives for the 50+ population in HIV responses in 2015-2016, including recognition of the need to collect data on older people through the Tanzania Output Monitoring System for HIV and AIDS.

Bangladesh

A new partnership with the Ministry of Health and Family Welfare and academic institutions was established to review and revise national health policies and health curricula. The initial focus will address issues of dementia and mental health. HelpAge is the lead agency of the new Bangladesh Dementia Action Alliance Foundation, established to ensure the development of an integrated approach to dementia, providing health and social care.

Helping older people access appropriate health, HIV and care services

Receiving treatment for communicable and non-communicable diseases, and having the information to prevent or manage them, is essential if older people are to remain active and live with dignity. Through our direct work, our funding for partners, and building relationships with governments, we helped more than 1.4 million older people to access health, HIV and care services in 29 countries – over 50 per cent more people than last year. This rise was mostly due to government policies being put into practice in the Philippines and Tanzania, where 1.2 million older people were able to access government services.

We did more this year to prevent ill health and treat poor health through outreach to older people in remote areas, as well as preventing, managing and treating chronic diseases and NCDs. Training health and care staff became a more prominent part of our work, covering 3,300 government and local agency health staff and 4,800 community health, HIV and care workers or volunteers – almost double last year.

Here are some specific examples of how we helped older people get better access to health and community care services:

Colombia

We worked to ensure the implementation of the Mental Health Law passed in 2013. Our partners, the Colombian Alzheimer Family Association and the Montes de Maria Foundation, supported 2,400 older people affected by Alzheimer's disease and dementia by training families caring for affected older people and by raising awareness of mental health issues in old age in rural communities and with local authorities.

Uganda

We supported our Affiliate Uganda Reach the Aged Association, partner Caritas Gulu and their network of 150 OPAs to develop local solutions to health-related challenges. OPAs monitored the delivery of health services and reported barriers to access and cases of

discrimination, resulting in 5,000 older people having better access to local health and HIV services. Primary health staff in six districts were trained to deliver age-friendly health services, such as special clinic days for older people. This work also shortened waiting times to see a doctor. At a more technical level, we conducted training on home-based care management with staff from health facilities in one district to pilot a care scheme for older people who are terminally ill.

Moldova

Our work focused on diabetes and hypertension but also integrated social care into its activities. We trained 160 volunteers to provide homecare visits to 4,300 older people and to undertake basic monitoring of chronic conditions. Where concerns are identified, the programme provides referral to “medical express testing”, and outreach services provided by health specialists. During harsh winter months, support is provided in the form of wood for heating and meals. The success of our work is based on the effective working practices developed between government health and social service departments and OPAs, which select those needing support, plan activities and implement the referral services.

Vietnam

Health services, health education and healthy ageing activities were delivered through the national network of intergenerational self-help committees (ISHCs). The committees ensure that 7,000 older people receive twice-yearly health check-ups and treatments. Health awareness sessions were conducted with 24,000 people and over 5,000 older people participated in regular physical exercise sessions. The ISHCs also provide home-based care for 600 older people.

Haiti

We focused on reducing the impact of waterborne diseases, providing water purification equipment to 600 vulnerable households which include older people in 18 communities. We provided 6,600 community members with education on water and sanitation. A 20 per cent drop in waterborne diseases was reported by the community health clinics.

Jamaica

We commenced a pilot programme to improve prevention and treatment of eye diseases caused by diabetes, in partnership with the Ministry of Health. Activities included regular health and information “fairs” to provide screening and health information to 500 older people. We also trained 173 healthcare providers and community associations in the prevention and management of diabetes and related eye disease, and how to improve their healthcare practice and delivery to older people.

Influencing international and regional policy and practice

International and regional commitments, and policies that include older people's health, HIV and care needs, play an essential role in influencing the actions of national governments. Here are some examples of our international policy influencing work this year:

WHO World Health Report on Ageing 2015

We contributed to the conceptualisation and development of the forthcoming WHO World Report which focuses on ageing by seconding the HelpAge Health Policy and Programmes Adviser to WHO. This has enabled us to be more closely involved with both the content of the report and the upcoming launch. It will also allow us to set the positions and work we will take forward, based on the content of the report, over the coming years.

UNAIDS Gap Report

UNAIDS' 2014 report on the HIV epidemic included new data on prevalence among people aged 50 and over. Older people were also identified as one of 12 key vulnerable groups, with the issues they face highlighted. This builds on HelpAge's continued influencing work with UNAIDS and the progress made on data collection since 2013.

WHO Global Update on the Health Sector Response to HIV

The report included an analysis of the health challenges faced by people living with HIV in their older age. We worked to influence the content of the report and as a result, evidence from HelpAge programmes and research funded by HelpAge was included.

Influencing data collection on people aged 50 and over

We had direct input into the US government's consultation on the Demographic Health Survey in 2014, and influenced other external stakeholders, including UNAIDS, to call for the survey's expansion to include people aged 50 and over. Although it was ultimately unsuccessful in changing the survey, USAID recognised the importance of the issue and is now developing a new survey mechanism for HIV that will more easily include people in older age. We were also invited to participate in the UN HIV Indicator Working Group and to serve as an expert on an Indicator Review Panel as part of WHO's review and development of HIV Indicator guidelines.

Raising awareness of older people's health, HIV and care needs

Age Demands Action on Health campaign

The reach of this campaign increased from 26 to 40 countries. ADA on Health this year called on governments to implement measures for universal health coverage, so that everyone can access the health services they need, including prevention, treatment, rehabilitation and palliative health and care services, free of charge. This cannot be achieved without investing in age-friendly primary healthcare. Health services need to be adapted and accessible to older people. The campaign achieved several key pledges for action from governments:

Albania

The government committed to restart negotiations within its ministries on a draft law for pensioners, and for new schemes to be provided at primary health system level, aiming at early detection of chronic diseases among people aged 40-65.

Kenya

The Ministry of Health committed to ensure that public universities include geriatric studies within all their health courses and that the ongoing review and restructuring of the National Hospital Insurance Fund includes older people.

Fiji

The Ministry of Health committed to ensuring a new National Wellness Framework that will address NCDs, hypertension and the wellbeing of older people. They also pledged to introduce an "express card" for older people to ensure they can access health services from any health service providers at no cost.

Global action 3: Enabling older women and men to actively participate in, and be better supported during, emergency and recovery situations

Our vision is that older people affected by crises and disasters receive the assistance and protection they need, in accordance with humanitarian principles.

What did we want to change?

We wanted humanitarian policy makers and aid workers to understand how humanitarian crises affect older people, and to provide an appropriate level of funding and programming support. We wanted all organisations to include older people in their emergency response programming, in accordance with humanitarian principles.

How did we do this?

- **We responded directly to older people's basic and other needs in emergencies** and supported their own recovery efforts afterwards. We responded to all seven of the humanitarian crises for which the UK Disaster Emergencies Committee launched appeals between April 2010 and March 2015: the East Africa drought, Pakistan flooding, the Haiti earthquake, the Syria crisis, the Philippines Typhoon Haiyan, the Gaza conflict and the Ebola crisis.
- **We built a body of operational experience and shared our technical expertise** on how older people can receive effective assistance and protection in emergencies.
- **We produced strong evidence on the needs of older people and guidance on how to address this** to share with other providers of humanitarian assistance.
- **We provided a high-quality service to other humanitarian actors** to help them integrate and mainstream older people in their policy and programmes. Our new Age and Disability Capacity-building Project (ADCAP) for humanitarian staff is helping us to achieve this.
- **We raised awareness that disaster preparedness planning** must use the valuable local knowledge that older people have and address their needs. We strengthened disaster preparedness planning by investing in technical expertise, adhering to good practice guidelines, and working to scale up the use of our emergency preparedness planning tool (ALERT) to improve the timeliness and effectiveness of our response.

What have we achieved since 2010?

Against our targets

We supported over 1 million older people and their families in emergencies in 33 countries over the past five years.

We influenced changes to the funding policies of all four major humanitarian donors – USAID, the EU, the UN system and the UK's Department for International Development (DFID). The changes in their practices and funding requirements have the potential to give greater support in crises for millions of older people.

The Sendai Framework 2015-2030 – a new international framework on disaster risk reduction – included older people for the first time and provides a basis to hold governments to account on their progress in managing disaster risk.

We ensured that the Sphere Project's Humanitarian Charter and Minimum Standards in Humanitarian Response included standards to address age and vulnerability.

The HelpAge International network was awarded the prestigious Hilton Humanitarian Prize for promoting the inclusion of older people in humanitarian action.

Important milestones

We established ourselves as technical experts in our core sectors: health, nutrition, livelihoods, cash assistance and protection.

Our expertise was recognised by the humanitarian clusters system. As a result, we were invited to provide secondments to the Protection Cluster and Food Security Cluster at global and country levels. We now co-chair the Global Health Cluster Strategic Advisory Group.

We are a major contributor to improving the performance of the international humanitarian system – as an active member of the Start Network (a consortium of UK humanitarian agencies) and as the lead agency for the Age and Disability Capacity-building Project and ALERT disaster preparedness project.

Our contribution to International Day for Disaster Reduction (2014) with the UN and creation of Charter 14 on Older People in Disaster Risk Reduction successfully promoted commitments from governments and humanitarian agencies to include older people.

Global action 3

Measuring our progress: We will enable older people to actively participate in, and be better supported during, emergency and recovery situations

Our indicators	Delivered in 2014/2015	Growth or change on 2013/2014	Key changes	Our targets for <i>Strategy to 2015</i> (2010/2015)	What was achieved by March 2015
Target for 2015: Older men and women receive direct assistance from us and our partners to prepare for, withstand and recover from emergencies					
Number of countries where we provide humanitarian assistance or recovery programmes	23 countries	6 new countries	First time responses delivered in Ukraine, Lebanon, Serbia, South Sudan, Indonesia and Nepal	28 countries supported (since March 2011)	33 countries
Total number of people benefiting from emergency response and recovery programmes	254,000 people with 56% women	169,000 more people with 56% women	Response and recovery actions provided in 23 countries. Response scale was typically relatively small (5,000 people or less), excepting Ethiopia and Sierra Leone	824,000 people supported, with 55% women	1,033,000 people with 59% women
Target for 2015: Ten major humanitarian agencies recognise and respond to the needs and capacities of older men and women in emergency preparedness, response and recovery					
Number of countries where we work to improve national disaster preparedness and response plans	9 countries	1 country	New engagements with humanitarian cluster systems in South Sudan	22 countries with engagements	24 countries
Number of humanitarian agencies that specifically respond to older people's needs in their policy and programmes	19 agencies	3 agencies	3 new partners – Médecins du Monde, International Medical Corps and the BOND UK NGO Humanitarian Working Group	24 agencies	25 agencies

What did we achieve in 2014/2015?

We met or exceeded our targets this year, with responses delivered in the Ukraine, the occupied Palestinian territories (oPt) and in response to the South Sudan, Syria and Ebola crises. With our influencing successes with the UK government this year, we have now achieved changes to the funding policies of all four major humanitarian donors – USAID, the EU, the UN system and DFID. The changes in their practices and funding requirements have the potential to achieve greater support in crises for millions of older people.

This year was crucial in recognising the needs and role of older people in disaster risk reduction. Collaboration with the UN on International Day for Disaster Reduction (2014) saw a new charter launched to promote commitments to support older people in disaster risk reduction. The Sendai Framework 2015, developed at the World Conference on Disaster Risk Reduction, fully included age-inclusive approaches.

We continued to influence the policies and practice of other agencies, not only through our engagement at headquarters levels, but increasingly at national levels. Our initiatives on operational partnerships with our disaster preparedness system, ALERT, and mainstreaming initiatives under the Age and Disability Capacities project (ADCAP) were instrumental in building new partnerships and strengthening existing ones, covering international and national partners and governments.

Responding to emergencies and early recovery

The specific needs of older people are often under-served in emergencies and early recovery programmes, although we are making significant progress in persuading agencies and donors to address this gap. Our emergency response continued to improve this year, reflecting our investments in capacity building for needs assessment, health, livelihoods, and disaster preparedness and training. Our achievements this year include the following:

- We responded to emergencies – large and small – and early recovery in 23 countries, providing support directly to 155,000 older people and their families and community members.
- We assisted older people affected by conflict and displacement in twelve countries: Colombia, Dominican Republic, DR Congo, oPt, Pakistan, Sudan, and Ukraine and in Jordan and Lebanon (in response to the Syria crisis). Support was delivered to older people affected by the conflict in South Sudan, including in Ethiopia and Uganda.
- We assisted older people during and in the aftermath of natural disasters in 10 countries: Bangladesh, Bolivia, Haiti, Indonesia, India, Mozambique, Nepal, Serbia, Thailand and Vietnam.
- We provided secondments to ensure age-inclusion to our Affiliate Age International in its response to the Ebola crisis in Liberia and Sierra Leone. Technical advice enabled delivery of age-inclusive health education and community response planning to 100,000 community members.

Some examples of how we directly supported older people, and built partnerships, to improve the support older people receive in crises this year included:

South Sudan crisis

Our work in Ethiopia, Uganda and in new programming within South Sudan directly supported 20,000 older refugees and their families. In Ethiopia, South Sudanese refugees received emergency food aid and cash transfers. In Uganda needs assessments in ten refugee settlements, with partners HIAS, Lutheran World Foundation and Adventist Development and Relief Agency, led to the delivery of essential practical and social support for 2,400 older refugees. In South Sudan, we directly supported older people's needs in the capital Juba and built better inclusion of older people within the programmes of 10 humanitarian agencies, with 3,000 older people included in the water and sanitation and infrastructure activities of ACTED. Eyecare services were received by 600 older people through the work of Handicap International, Light of the World and International Medical Corps.

Ukraine

Following the outbreak of violence in Eastern Ukraine, HelpAge and its partner TLU, were amongst the first agencies to respond to the crisis, delivering food and non-food items to 5,000 older people isolated by the conflict or in nursing homes in Eastern Ukraine. Information campaigns were run to ensure older people understood their rights and entitlements in the context, and we provided pre-ambulance health support from volunteers. We now have new funding to substantially increase the outreach of our work.

Gaza conflict

Our intervention, during and after this conflict, supported 4,500 older people in a range of practical ways. We provided essential health supplies and services, assisted in repairing homes and distributed mobility aids and spectacles. Our Affiliate El Wedad supported 700 older people affected by trauma and mental health issues, providing counselling and treatment with support from Handicap International. Through our advocacy and partnership, 2,800 older people also received food vouchers from WFP and Oxfam.

Lebanon

We responded to improve the medical care to patients with diabetes and hypertension in both host communities and among Syrian refugees settled in five regions of north-eastern Lebanon. By training 300 health staff, and providing equipment, laboratory tests, medication, awareness raising and outreach activities, 1,600 older people were able to be screened in primary health centres and mobile clinics, with two-thirds receiving further support.

Preparing for disasters and reducing their impact

Disaster risk reduction (DRR) programmes continued in 17 countries, with our most substantive work carried out in Bangladesh, Mozambique, Myanmar, Pakistan and Vietnam. We trained governments, agency staff and community members to plan, prevent and prepare for crises. We supported 45,000 older people to create local plans and implement actions to mitigate and prepare for disasters. Some examples of our work include:

Mozambique

We improved age-inclusion in disaster preparedness and response plans, notably against the risks associated with climate change, droughts and cyclones. A new draft national strategy for disaster risk reduction now includes an assessment of older people. We provided ALERT training to seven agencies, including three government ministries, the Mozambique Red Cross, Save the Children and our Affiliate

VUKOXA. All have committed to include older people in their emergency plans and assessment maps. At a practical level, we reduced the risks of waterborne disease caused by flooding that contaminated drinking water supplies in Chokwe district, southern Mozambique. Water purification systems that are accessible to older people were installed and, with training provided, ensured potable water is available to over 20,000 people.

Pakistan

As a result of our continuous engagement with the Khyber Pakhtunkhwa Provincial Disaster Management Authority, vulnerable groups including older people were included in their five-year road map for DRR. The National Institute of Disaster Management is now also using our models and training materials in its work. We extended our work to establish a new programme in flood-affected communities in Sindh Province with a new partner, Sindh Rural Support Organisation. Training was provided in 30 communities in local level disaster planning and response management and how to include older people in DRR. As part of our initial work, partner staff and older people collected data on at-risk individuals and learnt how to analyse this information by gender, age and vulnerability and how they have been included or excluded in existing DRR plans.

Raising awareness and action on older people in disaster risk reduction

This was a significant year for enhancing older people's visibility in DRR, demonstrating the positive role they can play and their specific needs and vulnerabilities, before, during and after an emergency.

International Day for Disaster Reduction 2014

With the focus on older people this year, we raised awareness in partnership with the UN Office for Disaster Risk Reduction (UNISDR), through major events in South Africa, China and Jamaica and smaller celebrations in almost 100 countries. All were covered strongly in media and social media. We produced a flagship publication *Disaster Resilience in an Ageing World*, based on a review of our work demonstrating key approaches and guidelines to implementing age-inclusive DRR. Together with UNISDR, we launched a new government policy engagement tool, Charter 14 on Older People in Disaster Risk Reduction. We shall be seeking governments and other agencies that are willing to work towards its 14 targets and make commitments. Ten governments have already signed the charter and a further 20 have expressed interest.

The Third World Conference on Disaster Risk Reduction (Sendai, Japan)

A new international framework on DRR (the Sendai Framework 2015-2030) includes older people for the first time and provides a basis to hold governments to account on their progress in managing disaster risk. The framework identifies the vulnerabilities and positive contributions of older people and acknowledges that demographic change influences disaster risks.

To further hold governments and the aid community to account, we also launched the first Disaster Risk and Age Index, which follows the approach of the Global INFORM risk index, but like the Global AgeWatch Index looks specifically at the situation of older people.

Strengthening global and national partnerships

During the past five years, we have focused on changing the policies of major humanitarian donors – the UN, the European Commission's Humanitarian Aid Department (ECHO), the United States Agency for International Development (USAID)'s Office for Foreign Disaster Assistance and the UK government's Department for International Development (DFID). At the beginning of the year we had successfully influenced changes to policies and funding requirements of the UN, ECHO and USAID to include greater attention to age, gender and disability.

This year, following the publication of the UK government's response to a parliamentary enquiry on disability and development, which included specific recommendations on humanitarian assistance, we worked with Handicap International to support DFID in promoting the use of age and disability assessments and data in humanitarian programmes. We completed a Technical Guidance Note that will be used by DFID's Humanitarian Advisers to help them to integrate and address ageing and disability in DFID-funded programmes.

These commitments by the four major humanitarian donors now allow us to move forward in the coming years to focus on supporting good practice in the preparedness and response actions of humanitarian actors within their country programmes. This year we commenced two major partnership programmes to support this aim:

ALERT emergency preparedness system

HelpAge became the lead agency in the six-member consortium that will develop and implement ALERT in 12 countries over the next three years. ALERT training was provided in Kenya, Gaza, the Philippines, Mozambique and the UK this year. In the case of Gaza, this strengthened our ability to provide a rapid, well-developed response.

ADCAP (Age and Disability Capacity-building Project)

We initiated a new three-year consortium programme with seven partners with funding from the UK and US governments. A seven-member consortium of UK-based agencies was established under HelpAge's lead. Initial activities have included the development of minimum standards for age and disability inclusion, training materials and a competencies framework for Age and Disability Inclusion Advisers. These advisers will be embedded in eight organisations in Kenya, Pakistan and the UK, and will work to make their organisations more inclusive.

Further examples of our partnerships and their outcomes include the following:

The Global Protection Cluster (GPC)

We revived our working relationship with the Global Protection cluster, taking part in two initiatives that provide significant opportunities to promote ageing issues in humanitarian emergencies. The first initiative was in support of an analysis of protection priorities, risks and gaps in current humanitarian crises. The second was a review of ongoing protection policy work with a view to harmonising these efforts to work towards common goals.

The Global Food Security Cluster

We concluded our two-and-a-half-year secondment. The secondment has produced training modules on issues integrated into staff development programmes and a checklist for cluster coordinators on inclusive response coordination (a tool that has also been endorsed by the Nutrition Cluster). Alongside this work, our adviser was deployed to South Sudan, Iraq and to the Syria response as the Food Security Cluster Coordinator, providing opportunities through training and coordination activity to mainstream response to ageing.

The Gender Standby Capacity Project (GenCap)

We continue to work closely with GenCap. Following the evaluation of the UN Inter-Agency Standing Committee (IASC) Gender Marker, our recommendation for the Marker to include age was unanimously agreed by the evaluation working team. This inclusion is essential to support monitoring of inclusion standards in humanitarian programmes.

New in-country partnerships

To advance the scale and quality of our programmes addressing health and NCD issues for older people, new partnerships were developed with Médecins du Monde and the International Medical Corps in Lebanon and South Sudan respectively.

Global action 4: Building global and local movements that enable older people to challenge discrimination and claim their rights

Our vision is to end age discrimination and see the rights of older people recognised, promoted and protected in national and international law and in practice.

What did we want to change?

We wanted ageing to be high on the political agenda. We wanted a growing movement of citizen action, led by older people, to hold governments to account and secure the rights and entitlements of older women and men.

How did we do this?

- **We trained older people's groups and their communities** to campaign on specific legal and rights issues, and to hold their government to account by monitoring the delivery of services.
- **We monitored international policy processes, the UN rights system and governments** to ensure that older people's issues were included, and that older people's organisations were consulted. We provided evidence of rights violations, particularly against older women, and submitted reports to the UN system.
- **We provided leadership, information, resources and campaigning platforms** to allow older people to claim their rights and entitlements and fight age discrimination. We supported older people's associations to play a leading role in raising issues with policy makers, particularly at national level.
- **We mobilised action on specific violations of older people's rights** through our Age Demands Action (ADA) campaign and by working with older people and other community activists to address violations.
- **We built a growing movement of people around the world** who are willing to raise their voice in support of older people. We did this through our work with older people's associations, by supporting our Affiliates to build support in their home countries, through our website and publications and through our ADA campaign. Our work particularly sought to build international momentum for a UN convention on the rights of older people.

What have we achieved since 2010?

Against our targets

The Global AgeWatch Index was launched in 2013. It established the importance of measuring the wellbeing of older people across different dimensions (income, health, capability and enabling environment) and stimulated high-level national debates on ageing.

The number of older people's associations grew, with 8,000 new associations formed in 38 countries, comprising almost 500,000 members. Almost half of these older people's associations monitored government service delivery and lobbied and campaigned on the issues where they wanted to see change.

Almost 290,000 people signed a petition calling on the UN to create a new convention on the rights of older people.

New laws, national policies and plans on ageing or the rights of older people were enacted or revised in at least six countries – Bangladesh, Bolivia, Mozambique, Pakistan, Tanzania, and Vietnam.

Our Age Demands Action campaigns were held in 73 countries over the last five years, with 285,000 participants – focusing on national policy change, better health and better rights.

Important milestones

The UN established an Open-ended Working Group on Ageing (OEWG) and appointed an Independent Expert on the enjoyment of all human rights by older persons.

UN treaty bodies held 13 governments to account on their policies and programmes to ensure older people's rights are met. This followed our reports to them on national issues relating to violence against older women, access to healthcare and a basic income in these countries.

Ageing in the Twenty-First Century: a Celebration and a Challenge (2012) was published in conjunction with UNFPA, with contributions from other United Nations agencies. The report included a chapter on the voices of older people, which stimulated a global debate on ageing and attracted media coverage reaching over 700 million people.

Global action 4

Measuring our progress: We will build global and local movements that enable older people to challenge age discrimination and claim their rights

Our indicators	Delivered in 2014/2015	Growth or change on 2013/2014	Key changes	Our targets for <i>Strategy to 2015</i> (2010/2015)	What was achieved by March 2015
Target for 2015: Older men and women lead community action to realise their rights to services and practical support in 25 countries					
Overall number of older people's associations (OPAs) HelpAge supports	6,350 OPAs with 442,000 members, with 57% women	3,000 more OPAs with 102,000 members, with 57% women	New programmes in Bangladesh, India, and Tanzania account for 70% of this growth	8,250 OPAs formed with 815,000 members (since March 2011)	10,000 OPAs with 858,000 members, with 57% women
Number of OPAs monitoring government service delivery	2,300 OPAs and 38,000 members	650 more OPAs with 11,000 more members	Programmes in the Philippines and Tanzania account for 50% of this growth	4,200 OPAs formed, with 130,000 members	4,060 OPAs with 114,000 members
Total number of older people assisted to claim existing entitlements	190,000 older people with 65% women	46,000 more older people with 70% women	Growth in 14 countries, with notable growth in Tanzania and India, Kenya and Colombia	501,000 older people supported, with 61% women	438,000 older people with 68% women
Target for 2015: Older men and women are helped by work that prohibits or reduces discrimination against them in 15 countries					
Number of countries where we work to prohibit or reduce specific issues of abuse or discrimination against older people	12 countries	4 new countries	Initiatives in Lebanon, Jordan and South Sudan on exclusion in humanitarian programmes, and access to health services in Nepal	18 countries	20 countries
Number of older people taking action locally around specific rights abuses and exclusion from services	51,000 older people with 55% women	38,000 more older people with 55% women	Continued growth in activism across 21 countries	156,000 older people, with 54% women	189,000 older people with 61% women
Number of countries where HelpAge is producing reports to UN or other rights mechanisms	7 reports from 3 countries	7 reports from 3 new countries	Reports from Kyrgyzstan, Nepal and Peru for the first time on social and economic rights and older women's rights	19 reports from 11 countries	23 reports from 13 countries
Target for 2015: A global group of one million committed supporters is developed by key HelpAge Affiliates					
Total number of HelpAge supporters	1.47 million supporters	183,000 supporters	Growth is mostly due to new data from our Affiliates on their databases, particularly HelpAge India	1.3 million supporters	1.47 million supporters

What did we achieve in 2014/2015?

We succeeded in building our network of Older People's Associations connected with our work either through our direct programmes or through our work with Affiliates and partners. The number of countries where we worked to reduce the discrimination or exclusion from development or humanitarian services grew.

The numbers of people, in-country and internationally, who are aware, interested and supporting our efforts also increased. Momentum towards a new convention on the rights of older people strengthened. The UN Open-ended Working Group on Ageing has been charged with seeking proposals on the content of this convention from member states. Our work with UN treaty bodies to highlight the violations of older people's rights continues to create calls on governments to show evidence that their policies and programme are treating older people fairly and taking account of their specific needs.

We were less able to support the growth in new OPAs that monitor and lobby on older people's services and entitlements. This, in turn, reflected lower than anticipated support to assist older people to claim their entitlements under existing government schemes. There is, however, a strong body of work and new funding in place which will redress this next year.

Supporting older people to combat exclusion and discrimination

Older people themselves are the greatest drivers of change and are at the heart of our supporter base. We worked actively with 6,300 older people's associations across our programmes, 3,000 of them newly established – predominantly in Bangladesh, India and Tanzania, with the start of new programmes in these countries.

We trained and funded 650 more older people's associations to work as older citizen monitoring groups, predominantly in Colombia, India, Kenya, and Tanzania, with new work in Russia, Serbia and Ukraine. These groups monitored the issues they identified locally and lobbied governments and other service providers to address any gaps in provision. Often they asked for new or better policies or practices to be implemented, to ensure that older people received their entitlements. Almost 190,000 older people received assistance in registering for an entitlement, such as a pension or free health insurance or receiving help with a legal issue with 46,000 registering for the first time.

In several countries, we have supported older people's associations to register as a legal entity, which allows them to fundraise more effectively and support their work independently. Our Age Demands Action campaigning events provided an effective and practical platform through which older people's associations and other organisations working with older people could raise their issues, presenting evidence of discrimination, abuse or inadequacy of services to governments.

Here are some examples of what older people's associations and community activists have achieved:

Ethiopia

Affiliate Ethiopia Elderly and Pensioners National Association (EEPNA) is the national umbrella network which now consists of nearly 300 older people's associations, with 200,000 older women and men as members, from across the country. We worked with EEPNA to build the capacity of its members and they lobbied for age-inclusive policy and programming by the government. This included participation in national consultations on the post-2015 Sustainable Development Goals (SDGs). EEPNA and its members also lobbied for implementation of the National Plan of Action on Ageing across 18 government departments. Multiple events raised awareness on the contributions and challenges of older people, reaching over 60,000 older women and men. The network's intergenerational Knowledge Transfer forums provided vibrant discussions promoting the transfer of older people's knowledge to younger generations.

Moldova

OPAs supported national research on elder abuse covering 2,000 respondents including older people, NGO and government staff. The survey's key findings show that 60 per cent of respondents recognised that discrimination based on age exists and 40 per cent identified violence and abuse of older people, particularly women. The research evidence was used in a training programme with 32 OPAs, building their awareness of violence and abuse of older people and how to respond. The training also developed the skills and ability to identify, counsel and care for victims of domestic violence and elder abuse and indicated where support can be found from professional agencies.

Pakistan

A network of 168 OPAs has now been established across three provinces that are supporting work to improve government policies and better include older people within other agency programmes. The OPA's Federation in Khyber Pakhtunkhwa was instrumental in the successful campaign to introduce new legislation to protect the rights of older people. The draft of the bill was developed through consultations between the government and older people themselves.

Improving national laws and policies on ageing and older people

To strengthen action on the rights of older people, we continued working with our Affiliates, partners and older people to promote the introduction of new or revised laws, policies or plans of action on ageing. These enable older people to hold their governments, and specific ministries, to account. This work was active in 22 countries, with a number of key outcomes achieved this year:

Lesotho

A National Policy for Older Persons was approved, potentially benefiting 160,000 older people, alongside a Social Development Policy specifically focused on older people. We supported a mapping and gap analysis of government and non-state actor policy and programme responses, which contributed to the policy development process.

Tanzania

The government agreed to present a new law to parliament to enact its National Ageing Policy (2003). This would make it a legally binding rights instrument and increase accountability for its implementation. A delayed National Human Rights Action Plan (2013-2017) was also finalised. The plan has specific objectives on the rights of older people, notably in relation to their participation in public life, provision of health and social care and financial security.

Pakistan

A new Senior Citizen's Bill was passed by the Khyber Pakhtunkhwa Province Assembly, the first ever legislation for the rights of older people in Pakistan. The bill commits to providing subsidised services in health, recreation, transport and cash transfers to extremely vulnerable older people. A national government policy on senior citizen's rights was also finalised and will be presented for government approval next year.

Uganda

The National Council for Older Persons Act was passed, allowing older persons to participate in the forthcoming elections and elect their own representatives for the first time in the history of Uganda's politics. We supported the drafting of the Act and worked with our Affiliate Uganda Reach the Aged Association (URAA) and partners to ensure the support of the government and parliamentarians for its enactment.

Lobbying the UN rights systems and governments

In the absence of a convention on the rights of older people, we engaged with existing international human rights mechanisms to address older people's rights. Submissions to UN treaty bodies and special rapporteurs, and lobbying efforts with Affiliates or other organisations resulted in the following successes:

Increased attention to older people's rights at the Human Rights Council (HRC)

Two new resolutions were issued that expressed deep concern at the widespread persistence of various forms of violence experienced by women of all ages. They called for governments to collect thorough and accurate data and statistics on violence against women and girls, disaggregated on the basis of sex, age, disability and other relevant variables.

Increasing protection of older people's rights through existing human rights treaties

Committee on the Elimination of All Forms of Discrimination Against Women (CEDAW)

Further to our submissions from Kyrgyzstan and Peru, CEDAW challenged these governments to provide information and statistical data on the situation of older women and the implementation of policies to address discrimination against women in their next periodic report.

Committee on Economic, Social and Cultural Rights (CESCR)

Further to our submissions, CESCR expressed its concerns that older people are not guaranteed an adequate standard of living in Kyrgyzstan, and that healthcare is unaffordable in Nepal. The governments of these countries have been asked to provide further information on these issues and their strategies to respond.

Working towards a UN convention on the rights of older people

We encouraged governments to attend and contribute to the 5th Session of the OEWG, which discussed violations of older people's rights. We also supported older men and women and representatives of civil society organisations to present evidence of such violations and argue the case for a new convention. We submitted three research summaries on older people's rights in Kyrgyzstan, Mozambique and Peru.

The key outcome of the session was agreement that the focus of OEWG must now be to create the main elements of a new convention. The General Assembly adopted a resolution inviting Member States to submit concrete proposals to be presented to the 2015 General Assembly. This is an important opportunity for HelpAge.

More than 27,300 campaigners took part in our Age Demands Action on Rights (50 per cent more than last year). The HelpAge network collected a further 90,067 signatures for the ADA global petition in support of a UN convention for the rights of older people. The petition, containing 287,638 signatures, was handed over to the Chair of the OEWG at the United Nations in New York.

We also worked with the Global Alliance for the Rights of Older People to consult older people directly on their experiences of discrimination and denial of rights. Their responses were analysed and a report, *In Our Own Words*, was released. We will track any proposals submitted by Member States to the OEWG in May 2015 to see if they reflect the contents of the report.

Building a movement of individual supporters

With our Affiliates and partners, we continued to encourage people to become activists to bring about a world where older people are treated more fairly, aiming to mobilise at least 1 million people worldwide who regularly support our work. We built our supporter engagement and created more opportunities for activism in a number of areas:

- **Age Demands Action** campaigns engaged supporters on World Elder Abuse Awareness Day, World Health Day and the International Day of Older Persons to provide a stronger voice for older people. Ten older activists from around the world are acting as a steering committee to plan for our 2015 campaign.
- **The Global AgeWatch Index 2014** was launched on the International Day of Older Persons, accompanied by the release of an *Insight Report* on income security. Five new countries were added to the Index this year, bringing the total to 96. This year we developed 34 country commentaries in cooperation with Affiliates and partners. To date, governments from eleven countries have given an official response to the Index. This data provides an invaluable tool for our campaign work.
- **Online communication** provided opportunities for activists and supporters to keep up to date with our work. We had 300,000 visits to our website this year – a slight reduction on last year – but use of our Facebook and Twitter sites doubled, with 39,000 interactions. Our content was displayed 34 million times in total, up from 14 million last year. The reduction in visits to our website may be a positive indication of the increasing use of the websites of our Affiliates and our regional sites in other languages and we will be evaluating this in the coming year.

Global action 5: Supporting a growing global network of organisations to improve their work with and for older women and men

Our vision is a dynamic global network of organisations with a strong core of Affiliates, working towards a better world for older people in which they have full recognition of their rights.

What did we want to change?

We wanted to continue strengthening the HelpAge network to improve national policy responses to ageing and ensure that older people are more visible in international aid programmes and policies. We wanted to protect older people's rights and entitlements by having a larger, better connected and outspoken global network of organisations campaigning for the rights of people in old age.

How did we do this?

- **We encouraged strong, committed organisations** working on ageing issues across the world to join the HelpAge International network and promote older people's rights.
- **We worked together** to monitor government responses to ageing, develop global campaigns – including Age Demands Action – targeting issues emerging from the Global AgeWatch programme. We are working to ensure that the issues of ageing and older people are reflected in the post-2015 Sustainable Development Goals (SDGs).
- **We provided expertise and support** to the network to deliver effective and accountable programmes with older people. We are continuing to develop and invest in regional and national networks of organisations working on ageing issues to engage in joint policy, influencing and programme work.
- **We created financially self-sufficient Affiliates** to enable them to deliver their work at national level and contribute leadership, resources, expertise and learning to others in the network.

What have we achieved since 2010?

Against our targets

The HelpAge International network grew from 83 Affiliates in 55 countries to 114 Affiliates in 73 countries.

At least 51 Affiliates actively engaged in our three flagship network initiatives: influencing the post-2015 SDGs, calling for a new UN convention on the rights of older people and our Global AgeWatch programme.

Fundraising by our supporting Affiliates – HelpAge Deutschland, HelpAge USA, HelpAge Korea, Cordaid, and WorldGranny have together raised £6.7 million for our work since 2011. Our income from all sources through Age International has grown from £9.6 to £12.8 million in the last four years.

Our *Strategy to 2020* was finalised following a year-long consultative process across the network.

Global action 5

Measuring our progress: We will support a growing global network of organisations to improve their work with and for older men and women

Our indicators	Delivered in 2014/2015	Growth or change on 2013/2014	Key changes	Our targets for <i>Strategy to 2015</i> (2010/2015)	What was achieved by March 2015
Target for 2015: 120 Affiliates, adopting HelpAge values and visual identity, form a global network shaping and supporting a common agenda and leading national, regional and international initiatives					
Number of Affiliates	113 Affiliates	3 Affiliates	3 new Affiliates from Cambodia, Finland and Uganda	117 Affiliates	114 Affiliates
Number of Affiliates taking on lead role in network initiatives	51 Affiliates	11 Affiliates	Increased action in support of promoting a new convention and influencing activities on the post-2015 Sustainable Development Goals	50 Affiliates	51 Affiliates
Number of countries where Affiliates are leading the network programme	53 countries	5 countries	Increase due to new Affiliation in 2013/2014, in Albania, Bosnia & Herzegovina, Kazakhstan, Sweden and Switzerland	45 countries	53 countries
Target for 2015: Global and national campaigns take place to demand changes in laws and policies to respect the rights of older men and women					
Number of countries where older people are involved in national-level action for improved services	60 countries, with 96,000 participants	4 countries with 57,000 participants	Belarus, El Salvador, Malawi and Mexico participated for the first time	73 countries, with 250,000 participants since 2011	73 countries and 285,000 participants
Number of countries where we work to promote national policies, plans and laws on ageing	22 countries	3 countries	New work on revision of national policy initiated in Malawi and South Africa	34 countries	35 countries
Number of older people with potential to benefit from new or revised policies	–	5.3 million more older people, with 55% women	New policies enacted in Ethiopia, Pakistan, the Philippines, Vietnam and Zanzibar related to national policy on ageing, health and social protection. Work continues on new policies in Bangladesh, Kenya and Nepal	20 million more older people, with 57% women (as a result of new or improved policies enacted since March 2011)	15.82 million more older people with 59% women
Target for 2015: Awareness of the international ageing agenda is raised in the UK and five OECD countries through campaigns and development education					
Total awareness/reach of the HelpAge brand*	260 million people reached	–	Awareness significantly increased. Launch events for International Disaster Risk Reduction Day and the Global AgeWatch Index generated higher visitors than our ADA campaigns this year.	250 million people reached (revised 2015)	260 million people reached

* The calculation of this figure was revised to reflect common commercial practice. It is now calculated using 2% of the potential viewership of our media and online work. Since March 2011 to March 2015, the reach has grown from 18 million people to 260 million using this consistent method of calculation.

What did we achieve in 2014/2015?

Our network of Affiliates grew once again in both numbers and activism. Our three key global network initiatives – Global AgeWatch, the post-2015 SDGs, and the call for a new convention on older people's rights – continued to drive awareness and action at international, regional and national levels. Our efforts together give credible cause for optimism that ageing will be expressly included in the SDGs and hence provide a strong basis for negotiation with governments. Similarly, commentaries and national discussions on the data emerging from the Global AgeWatch Index are providing powerful evidence and support for better attention to older people. Lastly, with more Affiliates – 17 in total now – being accredited to the UN Open-ended Working Group on Ageing, the voices of older people and the organisations that work with them now have an opportunity to influence the content of any new convention.

Affiliates participated in a consultative process throughout the year to help us establish our new *Strategy to 2020*. We also examined the future structure and role of the HelpAge International network needed to deliver the new strategy and increase the impact of our work together.

A stronger network

Three new Affiliates from Cambodia, Finland and Uganda brought the HelpAge network to a total of 114 Affiliates from 73 countries.

This year saw close consultation with our Affiliates to build a stronger future together.

Developing our *Strategy to 2020*

We finalised our new five-year *Strategy to 2020* this year, inviting discussion, comments and input on the shape of our work. The strategy was approved by the Board in November 2014.

Network review

We engaged external consultants to review potential options for our future as a network, with input provided from Affiliates, staff and other agencies using network structures.

We also continued to invest in building a larger and more effective global network by:

- Investing in network development – notably in strengthening Affiliates' campaigning and advocacy efforts, coordinating humanitarian action, promoting website development and management, and guiding new Affiliates on how to join our network.

We completed our programme of support for public fundraising in Germany, USA, Spain and South Korea this year, helping our Affiliates in these countries to be better able to sustain their work.

- Providing training and support on how to use the Global AgeWatch Index, including webinars for Affiliates and our staff from all regions.
- Improving information flows to our Affiliates on new humanitarian emergencies to support their fundraising, advocacy and communications activities.

Affiliates as leaders

Our Affiliates and partners continued to strengthen their outreach internationally and in their home countries. This year, Affiliates again made significant contributions by:

- lobbying for the participation of their governments in the OEWG, and
- influencing their government's position on the post-2015 SDGs.

Here are some examples of the work our Affiliates have led:

Southern Africa Regional Age Network

Over the past two years a network of 70 organisations – Affiliates and partners – has been established. This network established a focus for their strategies in the coming five years, concentrating on health, social protection, livelihoods and emergency response. The network collaborated and advocated for the ratification of the African Union protocol on the rights of older persons and shared experiences about progress in promoting a UN convention and a post-2015 agenda that includes older people. As an example of their cooperation, network members hosted events at three global conferences held in the region and at the influential 10th Southern Africa Civil Society Forum (SADCCNGO Forum) 2014. The latter event resulted in the call to implement a Basic Income Grant for all vulnerable citizens, including older people in the region, and also identified the need for an SADC protocol for older women and men by 2016.

HelpAge Network Asia/Pacific Regional Conference on Ageing

Affiliates worked with us to convene a conference on "Older People in Ageing Societies: Burden or Resource?" This conference viewed issues from three perspectives: health, the economy and societal perceptions of older people. It was attended by 200 participants from governments, academia and civil society in 29 countries across Asia and the Pacific. The success of the conference was a consensus that in the Asia region, the social and economic implications of ageing societies are now evident, as is the need for rapid adaptations to avert serious negative impacts on future economic growth and social stability.

Fundraising for the network

Our Affiliates HelpAge Deutschland, HelpAge USA and HelpAge Korea all raised funds for our work, together contributing £1.8 million to our income in 2014/2015 – with HelpAge Deutschland raising £1.15 million of this total. Income from the network in 2013/2014 was 15 per cent higher, but this was an exceptional year with significant funding mobilised for the Philippines emergency. These Affiliates have also facilitated our direct access to a number of key donors.

Age International

In addition to the financial support it provides to HelpAge – £12.8 million this year – Age International supported our global policy work, particularly on the SDGs, the OEWG session, contributions to the WHO World Health Report 2015 and in our influencing work with the UK Department for International Development. Age International is also our representative on the Disasters Emergency Committee.

Affiliates in our governance

Affiliate representatives from the regions in which we work formed an important core of the HelpAge Board, with 6 of 13 Trustees constitutionally required to be drawn from our Affiliates. They shaped our strategic direction and operational management. Their work this year had a particular focus on finalising our *Strategy to 2020* and leadership in the Network Review process.

Leading campaigns

As a network and global movement, we continued to make positive changes to government policies and practices.

The three major events of the Age Demands Action campaign took place across 60 countries with 96,000 campaigners taking part. The campaigners were drawn from 431 OPAs and activists from 50 Affiliates and 266 partners. Sixteen governments made commitments to older people to improve policies important to them, including: national policies on ageing, social protection, healthcare and better human rights instruments.

We focused on promoting network leadership in our three key international advocacy programmes:

Global AgeWatch Programme

The 2014 Global AgeWatch Index covered 96 countries, including five new countries, and received media coverage in 115 countries. An accompanying *Insight Report 2014* on income security was released, focusing on how different countries are responding to people's right to a secure income in later life, particularly by extending pension coverage. Additionally, 34 commentaries on the country Global AgeWatch Index indicators were produced in cooperation with Affiliates and partners. To date, eleven countries have reported receiving an official response from governments on the Index: Albania, Australia, Bangladesh, Canada, Kenya, Kyrgyzstan, Malawi, Mozambique, Netherlands, Slovenia and Sri Lanka.

Securing ageing in the Sustainable Development Goals (post-2015 development agenda)

Our post-2015 advocacy work successfully integrated ageing and older people in the current draft version of the Sustainable Development Goals Outcome Document. Ageing is covered in nine out of 17 SDGs and explicitly mentioned in the goal on health – but the risk remains that these gains may be lost in the final indicators and implementation plans. The Stakeholder Group on Ageing in New York, including our US Affiliates AARP and HelpAge USA, has been recognised by the UN as a key stakeholder to represent the issues of ageing in the ongoing intergovernmental negotiation process. We are strengthening our work in coalitions with youth, disability and women's groups. Eight HelpAge countries participated in the action/2015 campaign launch in January 2015, with 800 people of all ages mobilised and a media reach of 8.4 million people.

Calling for a UN convention on the rights of older people

Our Affiliates' and partners' participation at the 5th Session of the OEWG was significant, with the Council on the Ageing (Australia), Uganda Reach the Aged Association, Red Cross of Serbia, Slovenian Federation of Pensioners Associations, HelpAge USA, Age International, DaneAge and partners from Kenya and Portugal attending. Six Affiliates were accredited to OEWG this year, bringing the total to 17 Affiliates. The growing number of Affiliates and organisations accredited is also a strong signal to Member States of civil society commitment to this process and to older people's rights.

Development awareness and policy change in Europe

With our EU Affiliate network and wider alliances of civil society agencies, we worked to further influence the European Commission, the European Parliament and EU member state governments. This year our focus was on raising the profile of older people in policies and messaging at EU level on the SDGs, as well as on social protection and emergencies, and building support for a new convention on the rights of older people.

The most significant outcome of our work this year was the adoption of strong EU Council Conclusions on the post-2015 process following the European Commission Communication earlier in the year. It clearly states the importance of establishing the target of social protection for all, supporting an agenda that leaves no-one behind, and including an explicit reference to older people.

Our plans for 2015/2016

HelpAge International produced a new five-year strategy this year – *Strategy to 2020* – setting us on an exciting and ambitious course. It is informed by the situation of older people, especially in the developing world, and the changing political, economic and social environment in which they live.

Our plans for 2015/2016 include implementing or supporting programmes in almost **40 low- and middle-income countries** with an emphasis on countries experiencing complex political emergencies or with high vulnerability to natural disasters.

Our international policy and campaigning work focuses on widening the scope of our work and strengthening our partnerships in 60 countries under our ongoing campaign Age Demands Action and the Global AgeWatch programme. We will continue to mobilise support for a new UN convention on the rights of older people and ensure that the post-2015 Sustainable Development Goals (SDGs) include outcomes and targets to address the ageing of societies and older people.

Underpinned by a strong Secretariat of HelpAge offices, supporting and working with Affiliates and the wider network of Affiliates and partners, we will support older people to create a world where every older woman and man, everywhere, can say:

“I have the income I need” We will seek to secure the right of older people to the income they need through sustainable and resilient livelihoods, decent and appropriate work, with security of assets, and adequate social protection to ensure a dignified old age.

“I enjoy the best possible health and quality of life” We will draw on a broad range of expertise to ensure the right of older women and men to the best attainable health, nutrition and care services, enabling them to enjoy the best possible health and care, supporting wellbeing through to the end of life.

“I am safe and secure, free from discrimination, violence and abuse” We will campaign to achieve the right to safety and security, and freedom from all forms of discrimination, violence and abuse, for older women and men.

“My voice is heard” Our intergenerational movement will campaign for the voices of older women and men to be heard by decision makers. We will ensure that their experience is recognised and supported, working together as agents of change.

Our work in **humanitarian action and disaster risk reduction (DRR)** will support the aims outlined above by preparing for and responding to crises. We will work to ensure that older people's financial and food security, health, care and nutrition requirements and the

protection needs are addressed directly and by all agencies working in humanitarian crises and disaster risk reduction actions.

Our organisational priorities for 2015/2016

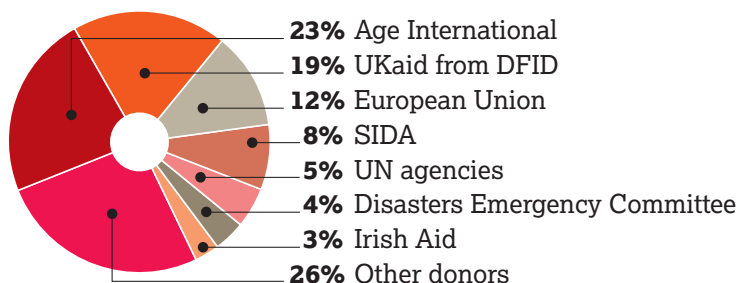
These will focus on eight key areas reflecting the programmes we seek to deliver, the standards we wish to achieve and the foundations we wish to set in order to achieve the strategy.

- 1. Develop clear and understandable policy frameworks and programming propositions for all the core areas of our strategy** focusing on our work in health and care, resilience and work and productivity.
- 2. Develop and consolidate a programme portfolio to generate learning and evidence for the core areas of our strategy**, prioritising our work in: social protection; informal sector work with farmers; older people in urban areas and in health and care to maximise the leverage of the WHO World Health Report 2015 on ageing.
- 3. Improve gender analysis and response in all our work** with targets set to include this within the design and implementation of our programmes.
- 4. Expand public advocacy and campaigning with the HelpAge network and directly with older people by:**
 - increasing their visibility and participation in the processes and decisions that affect them
 - focusing on greater inclusion and representation by older people themselves in policy debates
 - forging new alliances with governments and civil society to build the call for a convention on the rights of older people.
- 5. Step up our advocacy on the post-2015 agenda** to ensure that the new SDGs set and monitor targets that fully recognise an ageing world and older people.
- 6. Enhance HelpAge's profile as a humanitarian agency** through consistent and high quality responses and influencing work, and ensuring that our new Emergency Response Framework is implemented effectively.
- 7. Enhance the Secretariat function of the HelpAge network** by completing new universal management protocols with supporting Affiliates and commencing implementation of a Network Action Plan based on the 2014 Network Review recommendations.
- 8. Build our transparency and accountability across our organisation and programmes**, reviewing our organisational practice and increasing the use of accountability action plans in countries where we implement directly.

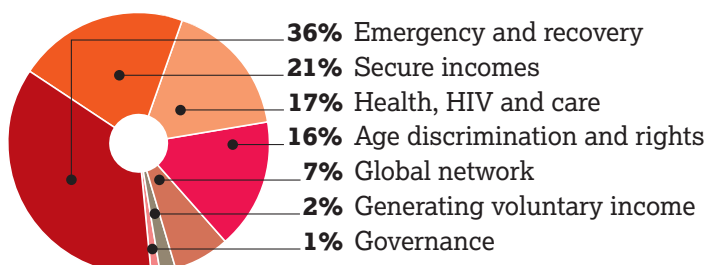
Financial review

Our income and expenditure at a glance

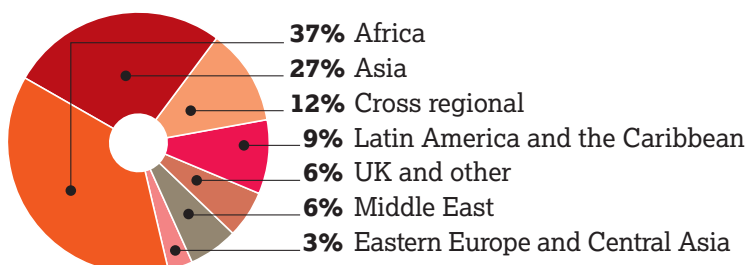
Where our money came from



How we spent this money



Where we spent this money



Notes

- Income in 2015 is £29m which is 10 per cent more than 2014.
- 100 per cent of expenditure is on charitable activities.
- Fundraising costs for generating voluntary income are low because we do not raise funds from the public directly in the UK.
- In accordance with our reserves policy, we have an increase of more than £100k in unrestricted general funds.

Highlights of our financial performance

	Year to 31 March 2015 £m	Year to 31 March 2014 £m
Income		
Restricted	18.9	15.6
Unrestricted	10.2	10.8
Total income	29.1	26.4

Expenditure

Restricted	(16.4)	(14.9)
Unrestricted	(10.2)	(11.1)
Total expenditure	(26.6)	(26.0)

Actuarial gain / (loss) on final salary pension	(0.1)	0.1
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Funds

Restricted	6.8	4.3
Unrestricted general	1.7	1.6
Unrestricted designated	0.3	0.6
Total funds excluding pension liability	8.8	6.5

Pension reserve	(1.0)	(0.9)
Total funds	7.8	5.6

Managing the risks to achieve our strategy and future prospects

Achieving our aims and objectives entails taking risks. The Trustees are responsible for ensuring that the major risks facing HelpAge International are managed appropriately and that there is a formal management process in place to assess risks and implement the appropriate strategies for the management of those risks.

A risk register is maintained, based on a formal risk assessment review conducted twice a year by senior staff; it covers financial and operational risks and is reviewed at each Board meeting.

We consider the main risks faced by HelpAge to be as follows:

- Expected changes in UKaid's programme partnership agreement and its impact on unrestricted income.
- The safety of staff in remote and insecure locations.
- Acquiring and retaining high calibre staff.
- Ability to deliver a consistent programme quality through devolved responsibility and implementation in a growing organisation.

The Trustees are of the opinion that the charity has the appropriate systems in place to mitigate significant risks. The internal audit plan is designed to provide assurance that the systems are in place and operating as prescribed.

Corporate governance report Structure, governance and management

Status and governing document

HelpAge International is a charitable company limited by guarantee, incorporated on 19 October 1983 and registered as a charity on 17 November 1983. The company was established under a Memorandum of Association, which sets out the objects and powers of the charitable company, and is governed by its Articles of Association.

Organisational structure

HelpAge International is the secretariat of a network of Affiliates. Affiliation with HelpAge International is a formal relationship which is open to any bona-fide organisation involved in issues of individual or population ageing, with the capacity of working with HelpAge International in its advocacy, research, policy, training, programmatic or fundraising work. HelpAge International works with Affiliates and independent partner organisations at an operational level in the implementation of a specific contract.

HelpAge International's operational and policy development centre is based in London and supports six regional development centres for Southern Africa, East, West and Central Africa, East Asia Pacific, South Asia, Eastern Europe and Central Asia, and Latin America and the Caribbean. HelpAge International also works through country development programmes and country project offices. As of April 2015, our Eastern Europe and Central Asia regional office has moved to be based in Jordan. It is renamed as Eurasia and the Middle East and manages our work in both the former Eastern Europe and Central Asia region and our work in any Middle Eastern country.

HelpAge International's approach is based on a commitment to developing grassroots work that benefits older people directly, supporting and strengthening organisations that are working in practical ways to improve the lives of older people and giving a voice to older people, especially the most disadvantaged. Most of our activities are carried out in partnership with older people's organisations, community development organisations and non-governmental organisations. We also work closely with academic institutions on research projects and with local and national governments and international agencies to ensure that ageing issues are at the centre of development policies. Working in partnership helps to strengthen the capacity

of organisations working with older people, connect experience with government thinking and build a global alliance of organisations working to raise the voice of older people in development processes. HelpAge International also manages programmes directly, especially in difficult circumstances such as conflict and emergencies.

Affiliates HelpAge International UK, HelpAge Deutschland, HelpAge USA, HelpAge Canada, HelpAge Korea, HelpAge International España and WorldGranny work in their respective countries to highlight ageing issues and the development challenges facing low- and middle-income countries, and play a significant role in raising funds and providing support for the programme activities of HelpAge International.

Trustees

HelpAge International has a Board of Directors who are the Trustees. The Trustees are responsible for the overall management and direction of the charity. The Articles of Association allow for a minimum of eight and a maximum of 15 Directors, at least six of whom are nominated by the Affiliates and up to nine appointed by the Board of Directors, having regard to their relevant qualifications and skills. The overall gender and geographical composition of the Board is also taken into account. The current Board consists of 13 Trustees, including six nominated by affiliated organisations.

Trustees are appointed to serve for a term of three years and, at the expiration of this period, may offer themselves for reappointment for two further terms of three years. At the expiration of a third term, Trustees may not be reappointed. Trustees appointed before 1 October 2011 are eligible to serve for up to two terms of four years, after which they may not be reappointed. New Trustees are either nominated by Affiliates or identified by existing Trustees or senior staff. All prospective candidates are interviewed by members of the Governance Committee and recommendations placed before the Board for consideration and vote. Once appointed, new Trustees undertake a comprehensive induction programme, meeting with key staff throughout the organisation.

Trustees are actively involved in supporting and promoting HelpAge International in many different ways according to their interests, specialist skills and location. The Board of Trustees meets twice a year and is supported by four permanent sub-committees: Executive, Finance and Audit, Governance and Fundraising. These sub-committees meet at least twice a year and provide specialist support as needed.

Connected charities

Help the Aged was a founder member of HelpAge International. On 1 April 2009, Help the Aged joined with Age Concern to form Age UK. In January 2012, Age UK and HelpAge International established a joint charity, HelpAge International UK (known as Age International), with 75 per cent and 25 per cent voting rights respectively. Age International is the UK member of the HelpAge global network of organisations working on ageing issues. Age International undertakes awareness-raising, fundraising and influencing activity in the UK to support the work of HelpAge International in developing countries, and administers the grants awarded by the Disasters Emergency Committee, and other UK donors to Age International that are sub granted to HelpAge International. Age International is a member of the Disasters Emergency Committee and delegates day-to-day responsibility for oversight and delivery of emergency programmes to HelpAge International. There is a formal Framework Agreement to March 2016 between HelpAge International, Age UK and Age International, which sets out the way in which the Parties work together and the basis upon which grants will be made to HelpAge International. There is also a formal Affiliate Agreement between HelpAge International and Age International.

Reserves policy

The Trustees have adopted a reserves policy which they consider appropriate to ensure the continued ability of the charity to meet its objectives. The policy was reviewed at a Board meeting in November 2014, taking into account risks of loss of income and unplanned costs. The Trustees agreed that unrestricted reserve should be between £1.7m and £2.5m. At 31 March 2015, the level of the unrestricted general fund, before pension provision, is £1.7 million (2014, £1.6 million).

A designated fund was established in the financial year 2011/12 for the specific purpose of organisational and network development, and the balance at 31 March 2015 is £0.3 million (2014, £0.6 million).

Pension

HelpAge International is a participating employer in the Help the Aged final salary pension scheme. The scheme was closed to new members from 31 July 2002 and to future accrual on 30 September 2009. The employer's financial contribution towards the fund deficit is a cost to the charity and full details are included in the annual accounts.

In accordance with FRS17, HelpAge International has obtained an actuarial valuation for the Help the Aged defined benefit scheme and recognised a pension liability of £0.97 million (2014, £0.93 million) in the accounts. The deficit does not result in any immediate liability to pay this amount to the pension scheme, as the resulting increase in contributions will be met from expected future income streams. Future contribution rates have been calculated in accordance with the terms of the pension scheme in the light of advice from the actuary and based on the results of the last full triennial valuation of the pension scheme carried out as at September 2009.

HelpAge International was a participating employer in the Pensions Trust Growth Plan Series 2, 3 and 4. HelpAge International withdrew from Growth Plan with effect from 30 June 2014. The debt for series 2 liabilities of £82,718 was paid in October 2014.

HelpAge International is also participating employer in the Pensions Trust Flexible Retirement Plan and all employees previously in Growth Plan have been transferred to the Flexible Retirement Plan.

Public benefit statement

HelpAge International has developed its aims and strategic plans to ensure that we provide public benefit and achieve the objectives set out in our governing document. The Trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the charity's aims and objectives and in planning its future activities.

Trustee and executive remuneration

Trustees do not receive remuneration in their position as Trustees, or for any services rendered to HelpAge International. They are reimbursed for travel, accommodation and incidentals when attending Board meetings and other meetings or programmes on behalf of HelpAge International. Some Trustees are also salaried staff of Affiliate organisations who receive grant funding from HelpAge International; however,

there is no direct reimbursement of the salaries of individual Trustees.

Employee jobs are evaluated and graded with an internally published salary scale. Salaries are benchmarked regularly against other international NGOs, most specifically those of a similar size. Annual salary awards are similarly benchmarked against the market and approved by the Board.

Statement of the responsibilities of the Trustees

The Trustees (who are also Directors of HelpAge International for the purposes of company law) are responsible for preparing the report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income or expenditure of the charitable company for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles in the Charities SORP
- make judgements and estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going-concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The Trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the Trustees are aware:

- there is no relevant audit information of which the charitable company's auditors are unaware, and
- Trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of the financial statements may differ from legislation in other jurisdictions.

Members of the charity guarantee to contribute an amount not exceeding £5 to the assets of the charity in the event of winding up while he or she is a member or within one year after he or she ceases to be a member. The total number of such guarantees as at 31 March 2015 was 13 (2014:14). The Trustees are members of the charity but this entitles them only to voting rights. The Trustees have no beneficial interest in the charity.

Auditors

Sayer Vincent LLP was re-appointed as the charitable company's auditor during the year and has expressed their willingness to continue in that capacity.

The report of the Trustees which includes the strategic report has been approved by the Trustees and signed on their behalf by:



David Causer
Trustee
8 September 2015

Independent auditor's report

We have audited the financial statements of HelpAge International for the year ended 31 March 2014, which comprise the statement of financial activities, balance sheet, cash flow statement and the related notes.

The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members, as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of the Trustees and auditors

As explained more fully in the statement of the responsibilities of the Trustees set out in the report of the Trustees, the Trustees (who are also the Directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the Trustees; and the overall presentation of the financial statements. In addition, we read all the financial and non-financial information in the report of the Trustees including the Strategic Report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing

the audit. If we become aware of any apparent material misstatements or inconsistencies, we consider the implications for our report.

Opinion on the financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2015 and of its incoming resources and application of the resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- the financial statements have been prepared in accordance with the Companies Act 2006.

Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the report of the Trustees, including the strategic report for the financial year for which the financial statements are prepared, is consistent with the financial statements.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Sayer Vincent LLP

Jonathan Orchard
(Senior Statutory Auditor) for and on behalf
of Sayer Vincent LLP, Chartered accountants
and statutory auditors, Invicta House,
108-114 Golden Lane London, EC1Y 0TL
9 September 2015

Financial statements

Statement of financial activities

(Incorporating an income and expenditure account)

	Note	Restricted £000	Unrestricted £000	Year ended 31 March 2015 £000	Year ended 31 March 2014 £000
Incoming resources					
Incoming resources from generated funds					
Voluntary income:					
Fees, donations, gifts and awards	2	24	240	264	435
Strategic grants for international programmes	2/16	2,403	8,317	10,720	11,171
Total voluntary income		2,427	8,557	10,984	11,606
Other grants for international programmes	3	16,505	1,617	18,122	14,790
Investment income		1	7	8	8
Total incoming resources		18,933	10,181	29,114	26,404
Resources expended					
Costs of generating funds					
Costs of generating voluntary income		0	498	498	403
Charitable activities					
Secure incomes		3,922	1,774	5,696	5,951
Health, HIV and care		2,976	1,636	4,612	4,266
Emergency and recovery		6,304	3,234	9,538	10,003
Age discrimination and rights		2,781	1,506	4,287	3,379
Global network		450	1,371	1,821	1,677
Sub-total		16,433	10,019	26,452	25,679
Transfer (to) / from fixed asset fund		(34)	0	(34)	38
Governance costs		0	235	235	264
Total resources expended	4	16,399	10,254	26,653	25,981
Net incoming resources before gains and losses		2,534	(73)	2,461	423
Actuarial (losses) / gains on defined benefit pension scheme	15	0	(139)	(139)	124
Net movement in funds		2,534	(212)	2,322	547
Reconciliation of funds					
Funds at the start of the year		4,294	1,221	5,515	4,968
Total funds carried forward	14	6,828	1,009	7,837	5,515

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

Balance sheet

	Note	31 March 2015 £000	31 March 2014 £000
Fixed assets			
Tangible fixed assets	9	592	541
Current assets			
Debtors	10	2,926	1,206
Short-term deposit		504	501
Cash at bank and in hand		6,924	5,643
		10,354	7,350
Current liabilities			
Creditors: amounts due within one year	11	(1,570)	(958)
Net current assets		8,784	6,392
Total assets less current liabilities		9,376	6,933
Provisions	12	(573)	(492)
Net assets excluding pension liability		8,803	6,441
Defined benefit pension scheme liability	15	(966)	(926)
Net assets including pension liability	13	7,837	5,515
Restricted funds			
Restricted income funds		6,345	3,845
Restricted fixed asset fund		483	449
Total restricted funds		6,828	4,294
Unrestricted funds			
General funds		1,713	1,585
Designated funds		262	562
Total unrestricted funds excluding pension liability		1,975	2,147
Pension reserve		(966)	(926)
Total charity funds	14	7,837	5,515

Approved by the trustees on 8 September 2015 and signed on their behalf by:



David Causer
Trustee

Cash flow statement

	Note	Year ended 31 March 2015 £000	Year ended 31 March 2014 £000
Reconciliation of net outgoing resources to net cash flow from operating activities			
Net incoming / (outgoing) resources		2,461	423
Depreciation charge	9	306	294
Increase in debtors	10	(1,720)	(249)
Increase / (decrease) in creditors	11	612	(423)
Disposal of fixed asset		0	84
Transfers to provisions	12	164	105
Use of provisions	12	(83)	(98)
Defined benefit pension scheme:			
Impact on net incoming resources before gains and losses	15	15	55
Employer contributions paid	15	(114)	(97)
Investment income		(8)	(8)
Net cash inflow from operating activities		1,633	86
Net cash inflow from operating activities		1,633	86
Returns on investments and servicing of finance			
Interest receivable		8	8
Capital expenditure and financial investment			
Purchase of tangible fixed assets	9	(357)	(331)
Management of liquid resources and finances			
Increase in short-term deposit		0	(501)
Repayment of loan	11	0	(75)
Decrease in cash in the year		1,284	(813)
Reconciliation of net cash funds			
Net funds at the beginning of the year		6,144	6,381
Increase / (decrease) in cash in the year		1,284	(813)
Cash used to repay loan		0	75
Cash transferred to short-term deposit		0	501
Change in net funds		1,284	(237)
Net cash funds at the end of the year		7,428	6,144
Analysis of change in net funds			
	At 1 April 2014	Cash flows	At 31 March 2015
Cash at bank and in hand	5,643	1,281	6,924
Debt due within one year (loan)	0	0	0
Short-term deposit	501	3	504
Total	6,144	1,284	7,428

Notes to the financial statements

1. Accounting policies

a) Accounting convention

The financial statements have been prepared under the historical cost convention and in accordance with applicable accounting standards and the Companies Act 2006. They follow the recommendations in the Statement of Recommended Practice, Accounting and Reporting by Charities (March 2005).

b) Fund accounting

b.1: Restricted funds are used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund, together with a fair allocation of management and support costs.

b.2: Unrestricted funds are available for use at the discretion of the Trustees in furtherance of the general objectives of the charity and include general funds, designated funds and pension reserve as follows:

General funds are unrestricted funds that are available for use at the discretion of the Trustees in the furtherance of the general objectives of the charity and which have not been designated for other purposes.

Designated funds comprise unrestricted funds that have been set aside by the Trustees for particular purposes. The aim and use of each designated fund is set out in the notes to the financial statement.

b.3: Pension reserve In accordance with FRS17 – Retirement benefits, the liability attributable to the pension schemes as set out in Note 15 is shown as a reduction of total funds. It is anticipated that these commitments will be met through future cash flows, and this is subject to regular review in conjunction with actuarial valuations and related professional advice.

c) Related charities

HelpAge International holds a 25 per cent interest in HelpAge International UK; however this is non-beneficial and therefore not accounted for as an associate but considered a related charity. Income is received as grants and recognised when due; the value of all transactions is included in Note 18.

d) Foreign exchange

Monetary assets and liabilities in foreign currencies are translated into sterling at the rates of exchange ruling at the balance sheet date. Transactions in foreign currencies are translated into sterling at the average rate of exchange in the month of the transaction. All exchange rate differences are taken to the Statement of Financial Activities (SOFA).

e) Income recognition

Donations are accounted for at the time of receipt. Gifts in kind are accounted for at estimated market value.

Grant income is recognised when the income is received or receivable, whichever is earlier. In applying this policy HelpAge International recognises income from grants when claims are made to donors in accordance with its individual funding agreements.

Bank interest is the amount receivable for the year.

1. Accounting policies *continued*

f) Resources expended

Resources expended are allocated to the particular activity where the cost relates directly to that activity. Resources expended include attributable VAT which cannot be recovered. However, the cost of support, management and administration of each activity is apportioned on the basis of an estimated time allocation against each theme.

The costs of generating voluntary income relate to the expenditure incurred by the charity in raising funds for its activities.

Governance costs are the costs associated with the governance arrangements of the charity, including meeting all constitutional and statutory requirements.

Grants payable are accounted for in line with the payment schedule stipulated in the relevant agreement, providing the conditions set have been met.

g) Fixed assets and depreciation

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life. The depreciation rate in use was as follows:

Computer equipment	4 years
Office equipment	4 years
Overseas project assets	4 years
Motor vehicle	4 years

Assets with a cost of over £250 are capitalised.

h) Terminal benefit provision

Most staff employed in offices overseas on local contracts are eligible for a service-related terminal benefit for each full year of service when they leave HelpAge International. International staff on UK contracts are eligible for a service-related relocation allowance. These benefits are accrued during the years of service.

i) Pension costs

HelpAge International is a member of the Help the Aged defined benefit scheme. The amounts charged in resources expended are the current service costs and gains and losses on settlements and curtailments. They are included as part of staff costs. Past service costs are recognised immediately in the profit and loss account if the benefits have vested. If the benefits have not vested immediately, the costs are recognised over the period until vesting occurs. The interest cost and the expected return on assets are shown as a net amount of other finance costs or credits adjacent to interest. Actuarial gains and losses are recognised immediately in the other recognised gains and losses.

The Help the Aged defined benefit scheme is funded, with the assets of the scheme held separately from those of the group, in a separate trustee-administered fund. Pension scheme assets are measured at fair value and liabilities are measured on an actuarial basis, using the projected unit method and discounted at a rate equivalent to the current rate of return on a high-quality corporate bond of equivalent currency and term to the scheme liabilities. The actuarial valuations are obtained at least triennially and are updated at each balance sheet date. The resulting defined benefit asset or liability is presented separately after other net assets on the face of the balance sheet.

2. Voluntary income

			Year ended 31 March 2015	Year ended 31 March 2014
	Restricted £000	Unrestricted £000	Total £000	Total £000
Strategic grants for international programmes				
UKaid from the UK Government ¹	0	2,670	2,670	2,670
Age International ²	2,403	5,647	8,050	8,501
	2,403	8,317	10,720	11,171
Membership fees	0	17	17	21
Donations and legacies	9	223	232	224
Gifts in kind	15	0	15	190
	2,427	8,557	10,984	11,606

1. Income from UKaid from the UK government is a Partnership Programme Arrangement grant

2. Income from Age International	£000
Unrestricted core grant	5,540
Restricted core grant	460
Additional grant	23
	6,023
Emergency appeal funds and other small project funds	740
Disasters Emergency Committee ³	1,287
	8,050

3. Income from Disasters Emergency Committee via Age International	£000
Ebola Response in Liberia	42
Philippines typhoon	597
Gaza crisis	241
Syria crisis	407
Total Disasters Emergency Committee grants	1,287

3. Grants received for international programmes

				Year ended 31 March 2015	Year ended 31 March 2014
	Note	Restricted £000	Unrestricted £000	Total £000	Total £000
Age International		4,494	248	4,742	2,533
European Commission		3,136	223	3,359	2,430
Swedish International Development Cooperation Agency		1,350	853	2,203	2,626
UN agencies		1,376	64	1,440	909
HelpAge Deutschland		1,118	0	1,118	1,361
Irish Aid		775	35	810	561
Other agencies (less than £500,000)		3,985	168	4,153	4,282
Total	17	16,234	1,591	17,825	14,702
Other income		271	26	297	88
Total		16,505	1,617	18,122	14,790

4. Total resources expended

	Staff-related costs (Note 7) £000	Programme costs £000	General office costs £000	Travel and related costs £000	Grants (Note 5) £000	Legal and professional fees £000	Fixed asset fund £000	Total £000
Activities								
Cost of generating voluntary funds	44	13	0	2	439	0	0	498
Secure income	1,911	1,636	70	415	1,637	27	0	5,696
Health, HIV and care	1,556	1,131	56	160	1,681	28	0	4,412
Emergency and recovery	3,914	3,476	117	406	1,578	47	0	9,538
Age discrimination and rights	1,723	1,159	53	288	1,040	24	0	4,287
Global network	706	296	22	219	563	15	0	1,821
Governance	156	0	8	54	0	17	0	235
Fixed asset fund	0	0	0	0	0	0	(34)	(34)
To 31 March 2015	10,010	7,711	326	1,544	6,938	158	(34)	26,653
To 31 March 2014	9,367	6,881	354	1,487	7,660	194	38	25,981

The following UK support costs are allocated on the basis of expenditure by different activities.

Support cost	1,986	38	336	125	0	30	0	2,515
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5. Grants paid to Affiliates and partner organisations

	Number of grants 2014/15	Year ended 31 March 2015 £000	Year ended 31 March 2014 £000
Coalition of Services of the Elderly – The Philippines	11	425	1,505
HelpAge Deutschland	3	390	273
HelpAge India	1	386	482
Africa Platform for Social Protection – Kenya	1	288	327
Coalition for Children Affected by AIDS – Canada	1	279	344
Relief Society of Tigray – Ethiopia	2	257	296
Centre for Community Development Solutions – Zimbabwe	3	193	0
HelpAge Korea	1	165	130
Women Empowerment Network – Kenya	1	164	104
Corporacion maniqua – Colombia	2	158	0
District Pastoralists Association – Kenya	1	149	88
Pastoralist Integrated Support Programme – Kenya	1	146	149
University College London	1	129	59
Young Men's Christian Association – Myanmar	2	124	87
Rural Agency For Community Development and Assistance – Kenya	2	117	213
Magu Poverty Focus on Older People Rehab Centre – Tanzania	4	116	22
Network Activity Group – Myanmar	1	113	75
Golden Plain Livelihood Development Services – Myanmar	2	106	0
Older People Association – Sudan	2	104	0
Associação de Protecção de Idoso de Tete – Mozambique	6	98	9
HelpAge USA	2	96	178
Tanzania Mission to the poor and disabled – Tanzania	8	95	22
National Young Women's Christian Association – Lebanon	2	93	40
HelpAge Sri Lanka	2	91	165
Union of Agricultural Work Committees – occupied Palestinian territories	1	89	96
Fundacion HelpAge International España	2	87	0
Turbota pro Litnikh Ukraine	2	87	45
Vietnam Association of the Elderly – Vietnam	4	86	43
Shaanxi Provincial Committee on Ageing – China	3	83	88
Pioneer for Peace and Development Organisation – Sudan	2	78	1
AMEL Association International – Lebanon	2	70	0
Handicap International – Syria	3	63	175
Tesfa Social and Development Association – Ethiopia	1	61	0
Debroe Delo – Russia	1	61	27
Sind Rural Support Organization – Pakistan	2	58	36
Senior Citizens Association of Zambia	3	56	56
Southern Sudan Older People's Organization – South Sudan	1	56	16
Karen Baptist Convention – Myanmar	1	55	29
El Wedad Society for Community Rehabilitation – occupied Palestinian territories	3	50	84
Other small grants		1,616	2,396
		6,938	7,660

6. Net incoming resources for the period

	Year ended 31 March 2015 £000	Year ended 31 March 2014 £000
This is stated after charging / (crediting)		
Other finance income:		
Expected return on pension assets	(233)	(176)
Interest cost on pension scheme liabilities	226	209
Net other finance cost of pension scheme	(7)	33
Depreciation	306	294
Trustees' indemnity insurance	6	5
Trustees' remuneration	0	0
Trustees' expenses	42	62
Auditors' remuneration (fees to Sayer Vincent):		
Annual statutory audit	13	13
Other services (project audits)	20	22
	33	35

During the period no Trustee received any remuneration. Trustees' expenses are for the reimbursement of travel, accommodation and subsistence costs for 13 trustees attendance at all meetings held throughout the period.

The UK office is leased from Age UK at a commercial rent of £98,350 per annum. The lease expires on 15 December 2022 and can be terminated at six months' notice.

7. Staff costs and numbers

	Year ended 31 March 2015 Staff	Year ended 31 March 2014 Staff
a) Average number of employees during the year was as follows:		
Policy, learning and strategy	12	13
Advocacy and communication	17	17
Programme support and quality	17	17
Resource development	9	9
Chief Executive, finance and support services	17	17
Total staff on UK payroll based in UK	72	73
Staff on UK payroll based overseas	39	35
	111	108
Overseas staff on local contracts	425	416
	536	524

	Year ended 31 March 2015 £000	Year ended 31 March 2014 £000
b) UK paid staff costs were as follows:		
Salaries and wages	4,040	3,632
Social security costs	277	252
Pension cost	171	158
	4,488	4,042
Overseas staff on local contracts	3,329	3,183
Other staff-related costs	2,193	2,142
	10,010	9,367

Other staff-related costs include staff training and workshops (£172,000), consultancies (£609,000), recruitment (£46,000), employer contribution towards defined pension (£114,000), and other non-salary costs.

	Year ended 31 March 2015	Year ended 31 March 2014
c) The number of staff whose emoluments fell within each of the following bands were:		
£60,000 – £69,999	3	3
£70,000 – £79,999	0	0
£80,000 – £89,999	0	1
£90,000 – £99,999	1	0

Remuneration excludes employer's pension contributions of £24,362 paid into pension schemes for all four higher-paid members of staff.

8. Taxation

The charity is exempt from corporation tax, as all its income is charitable and is applied for charitable expenditure.

9. Tangible fixed assets

	Unrestricted assets £000	Restricted project assets £000	31 March 2015 Total assets £000	31 March 2014 Total assets £000
Cost				
At the start of the year	214	1,493	1,707	1,568
Additions	10	347	357	331
Disposals	0	(56)	(56)	(192)
At the end of the year	224	1,784	2,008	1,707
Depreciation				
At the start of the year	122	1,044	1,166	980
Charge for the year	34	272	306	294
Disposals	0	(56)	(56)	(108)
At the end of the year	156	1,260	1,416	1,166
Net book value				
Computers	35	156	191	181
Other office equipment	0	56	56	88
Motor vehicles	33	284	317	254
Fixture and fittings	0	28	28	17
At the end of the year	68	524	592	541
At the start of the year	92	449	541	588

10. Debtors

	31 March 2015 £000	31 March 2014 £000
Other debtors	280	360
Prepayments	45	29
Accrued income	2,601	817
	2,926	1,206

11. Creditors: amounts due within one year

	31 March 2015 £000	31 March 2014 £000
Taxation and social security	68	71
Accruals	1,024	684
Other creditors	478	203
	1,570	958

12. Provisions

	31 March 2015 £000	31 March 2014 £000
Provision for terminal benefits (Reference to accounting policy in Note 1h)		
At the start of the year	492	485
Charged for the year	164	105
Utilised in year	(83)	(98)
At the end of the year	573	492

13. Analysis of net assets between funds

	Restricted £000	Unrestricted £000	Total funds £000
Tangible fixed assets	524	68	592
Net current assets less provision	6,273	1,938	8,221
Pension liability	0	(966)	(966)
Net assets at the end of the year	6,828	1,009	7,837

14. Funds movement

	At the start of the year £000	Incoming resources £000	Outgoing resources £000	Transfer valuation/ actuarial gain £000	At the end of the year £000
Restricted funds:					
Africa	179	7,763	7,230	0	712
Asia Pacific	1,816	6,063	4,226	0	3,653
South Asia	242	1,547	1,224	0	565
Latin America and Caribbean	453	1,304	1,550	0	207
Eastern Europe and Central Asia	151	691	615	0	227
Middle East	439	424	509	0	354
UK and other	565	1,140	1,078	0	627
Fixed asset fund	449	0	(34)	0	483
Total restricted funds	4,294	18,932	16,398	0	6,828
Unrestricted funds:					
General reserve	1,585	10,182	10,054	0	1,713
Designated reserve	562	0	300	0	262
Total unrestricted funds	2,147	10,182	10,354	0	1,975
Pension reserve	(926)	0	(99)	(139)	(966)
Total funds	5,515	29,114	26,653	(139)	7,837

Purposes of restricted funds and unrestricted funds

The charity has various funds for which it is responsible and which require separate disclosure, which are as follows:

Restricted funds: Income where the donor specifies the purposes within the overall aims of the organisation. Restricted funds will generally be utilised during the next financial year on agreed programme activities according to contracts with different donors.

Fixed asset fund: The fixed asset fund represents the net book value of assets held overseas that were purchased with restricted income. The full purchase cost is included within total resources expended as this is consistent with the basis of reporting to donors. The change in net book value is credited against expenditure in SOFA.

Pension fund: The pension fund represents the pension liability based on actuarial valuation of the defined benefit scheme. The transfer between funds on the balance sheet represents the actuarial gain for the year.

Unrestricted funds

General reserve: Unrestricted funds which are expendable at the discretion of the Trustees in furtherance of the objectives of the charity. In addition to expenditure directly on international work, such funds may be held in order to finance working capital.

Designated reserve: Unrestricted funds which are expendable at the discretion of the Trustees in furtherance of the specific purpose of organisational and network development.

15. Pensions

a) Help the Aged Final Salary Scheme

FRS17 disclosures for accounting period ending 31 March 2015

The Scheme is a defined benefit (final salary) funded pension scheme. The Scheme is closed to new entrants and to future accrual of benefits, but has retained the salary link for active members.

The expected employer contributions for the year ending 31 March 2015 are £114,000. These contributions include an allowance for administration expenses and PPF levies.

The Scheme assets neither include investments issued by HelpAge International nor any property occupied by HelpAge International.

The overall expected rate of return of the Scheme assets has been based on the average expected return for each asset class, weighted by the amount of assets in each class. The Scheme has no contingent assets or liabilities.

The Scheme holds quoted securities, and these have been valued at current bid-price. The corresponding amounts from previous years have not been restated.

Employee benefit obligations

	Value at 31 March 2015 £000	Value at 31 March 2014 £000
Present value of funded obligations	(5,634)	(5,104)
Fair value of Scheme assets	4,668	4,178
Deficit in the Scheme	(966)	(926)

The amounts recognised in the Statement of Financial Activities are as follows:

Current service cost	22	22
Interest cost	226	209
Expected return on Scheme assets	(233)	(176)
Total	15	55

The current service cost includes the cost of administration expenses and PPF levies.

Actuarial gain and loss

Net actuarial (loss) / gain recognised in year	(139)	124
Net cumulative actuarial loss	(876)	(737)

15. Pensions *continued*

a) Help the Aged Final Salary Scheme *continued*

Reconciliation of present value of Scheme liabilities and assets

Change in the present value of the defined benefit obligation

	Value at 31 March 2015 £000	Value at 31 March 2014 £000
Opening defined benefit obligation	5,104	4,729
Current service cost	22	22
Interest cost	226	209
Experience (loss) / gain arising on Scheme liabilities	(94)	100
Actuarial loss	578	230
Benefits paid (including expenses)	(202)	(186)
Closing defined benefit obligation	5,634	5,104

Change in the present value of the defined benefit obligation

	Value at 31 March 2015 £000	Value at 31 March 2014 £000
Opening fair value of Scheme assets	4,178	3,637
Expected return on Scheme assets	233	176
Actuarial gain	345	454
Employer contributions	114	97
Benefits paid (including expenses)	(202)	(186)
Closing fair value of Scheme assets	4,668	4,178

Assets in the Scheme as a percentage of total Scheme assets

	At 31 March 2015	At 31 March 2014
Gilts / fixed interest gilts	26.84%	25.57%
Bonds / fixed interest bonds	22.71%	12.96%
Equities	21.67%	28.94%
Property	28.03%	29.01%
Cash	0.75%	3.52%
	2015 £000	2014 £000
Actual return on Scheme assets	578	630

15. Pensions *continued*

a) Help the Aged Final Salary Scheme *continued*

Assumptions

Principal actuarial assumptions at the balance sheet date

	At 31 March 2015 pa	At 31 March 2014 pa
Financial assumptions		
Discount rate	3.30%	4.50%
Rate of increase in salaries	3.10%	3.50%
Rate of increase in payment of pre-2005 pensions (in excess of GMP)	2.00%	2.50%
Rate of increase in payment of post-2005 pensions (in excess of GMP)	2.00%	2.50%
Rate of revaluation of deferred pensions in excess of GMP	3.10%	3.50%
Inflation assumption (RPI)	3.10%	3.50%
Inflation assumption (CPI)	2.00%	2.50%
Expected return on Scheme assets	N/A	5.64%

	2015	2014
Demographic assumptions		
Mortality	S1 Normal base tables projected by year of birth assuming future improvements in line with CMI 2013 core projections with a long-term rate of improvement of 1% pa	S1 Normal base tables projected by year of birth assuming future improvements in line with CMI 2013 core projections with a long-term rate of improvement of 1% pa
Cash commutation allowance	80% of the maximum cash allowance available upon retirement	80% of maximum cash allowance available upon retirement
Withdrawal allowance	Allowance	Allowance

Other assumptions are the same as those used in the preliminary results of the Trustees' Scheme Funding valuation as at 30 September 2009.

History of experience gains and losses

	2015 £000	2014 £000	2013 £000	2012 £000	2011 £000
Defined benefit obligation	(5,634)	(5,104)	(4,729)	(4,225)	(3,915)
Scheme assets	4,668	4,178	3,637	3,259	3,228
Surplus / (deficit)	(966)	(926)	(1,092)	(966)	(687)
Experience adjustments on Scheme liabilities	94	(100)	7	(68)	(27)
Experience adjustments on Scheme assets	345	454	222	(144)	(3)

15. Pensions *continued*

b) The Pensions Trust Growth Plan

HelpAge International participates in The Pensions Trust's Growth Plan (the Plan). The Plan is funded and is not contracted out of the State scheme. The Plan is a multi-employer pension plan. Up to September 2001, 9 employees paid Additional Voluntary Contributions into the Series 2 Plan. Since the Help the Aged scheme was closed to new members in 2002 HelpAge International has offered membership of the Series 3 Plan to all staff.

Additional Voluntary Contributions paid into the Series 2 Plan up to and including September 2001 were converted to defined amounts of pension payable from Normal Retirement Date. From October 2001 contributions were invested in personal funds which have a capital guarantee and which are converted to pension on retirement, either within the Plan or by the purchase of an annuity.

During the accounting period, HelpAge International paid contributions into Series 3 Plan at the rate of 8.5 per cent, and members paid contributions at the rate of 5 per cent.

The valuation results at 30 September 2011 were completed in 2012 and have been formalised. The valuation of the Plan was performed by a professionally qualified Actuary using the Projected Unit Method. The market value of the Plan's assets at the valuation date was £780 million and the Plan's Technical Provisions (ie past service liabilities) were £928 million. The valuation therefore revealed a shortfall of assets compared with the value of liabilities of £148 million, equivalent to a funding level of 84 per cent.

The Scheme Actuary has prepared a funding position update as at 30 September 2012. The market value of the Plan's assets at that date was £790 million and the Plan's Technical Provisions (ie past service liabilities) was £984 million. The update, therefore, revealed a shortfall of assets compared with the value of liabilities of £194 million, equivalent to a funding level of 80 per cent.

HelpAge International made a decision to withdraw from the Pensions Trust Growth Plan with effect from 30 June 2014. The debt for Series 2 liabilities of £82,718 was paid in October 2014.

16. Grant income

	Year ended 31 March 2015 £000	Year ended 31 March 2014 £000
Strategic grants for international programmes		
Age International	8,050	8,501
UKaid from the UK Government	2,670	2,670
	10,720	11,171
Other grants for international programmes		
Age International	4,742	2,533
European Commission	3,359	2,430
Swedish International Development Cooperation Agency	2,223	2,626
UN agencies	1,440	909
HelpAge Deutschland	1,150	1,361
Irish Aid	810	561
The Margaret A. Cargill Foundation	449	0
US Agency for International Development	408	730
HelpAge USA	333	541
HelpAge Korea	310	299
Jersey Overseas Aid Commission	204	345
Royal Netherlands Embassy	202	143
Bureau of Population, Refugee and Migration PRM USA	163	41
Swiss Red Cross	150	22
KPMG Advisory Limited	119	263
Action Aid	116	0
Caritas France	63	0
FK Norway	95	82
Trocaire	92	0
Cordaid	90	146
The Southern Africa Development Community Secretariat	78	0
UKaid from the UK Government	78	0
Oxfam International	70	64
International Organization for Migration	70	54
Other agencies (less than 50,000 in 2015)	1,011	1,552
	17,825	14,702

16. Grant income *continued*

Income through Age International from the following donors:

Income
£000

UKaid from the UK Government for:

Field test of the safe Water Trust's Aqua filter Family Model in Haiti	11
Emergency response to the humanitarian situation in Gaza	266
Social protection rights component of Hunger Safety Net Project: Kenya	1,796
Reducing poverty by improving health for older people in Africa	833
	2,906

UNHCR for:

Sustainable Community Peace Building Project in Kreinek, West Darfur	57
Improving the lives and wellbeing of older people in West Darfur: Sudan	173
Restoring food security and livelihood in West Darfur	130
Shelter and non-food items for older people in West Darfur	85
Supporting the protection and inclusion of older people in humanitarian programmes	121
Strengthening the Ministry of social Welfare to fulfil its role in expanding social protection	1,024
	1,590

Save the Children (Humanitarian Innovation Fund) for:

RAM-OP: rapid assessment methodology for assessing the nutritional needs of older people	70
Age and disability capacity building project	123
	193

Big Lottery Fund for:

Empowering Older People to Improve Lives	53
	4,742

Income from Swedish International Development Cooperation Agency for:

Strengthening universal access to Social Protection and HIV/AIDS to prevent and mitigate the impact of HIV/AIDS and poverty in sub-Saharan Africa	1,370
Strategic Partnership	853
	2,223

16. Grant income *continued*

	Income £000
Income from Cordaid for:	
Disaster Resilience through Inclusion of DRR and Climate Change Planning: Pakistan	81
Provision of life-saving services to older people, persons with disabilities and vulnerable women displaced from Federally Administered Tribal Areas: Pakistan	9
	90
Income received from Irish Aid for:	
Accountability and Fulfilment for Older Persons (AFFORD)	810
Income received from HelpAge Deutschland for:	
Livelihood and resilience-building for older people in Borena: Ethiopia	77
Disaster preparedness by strengthening the resilience of vulnerable population	2
The Rights of Older People	33
Promoting food security for vulnerable older women and men and their families: occupied Palestinian territories	69
Emergency response to the humanitarian situation in Gaza	8
Improve nutrition and health conditions of vulnerable, flood affected people through provision of food and NFIs in Pakistan	238
Rebuilding lives, livelihoods and resilience of older people, their families and communities who were directly affected by Typhoon Haiyan-Philippines	384
Protecting and Promoting Women's Rights and their Social and Economic Empowerment: Tanzania	102
Effective response to the needs of malnourished older persons in West Darfur: Sudan	237
	1,150

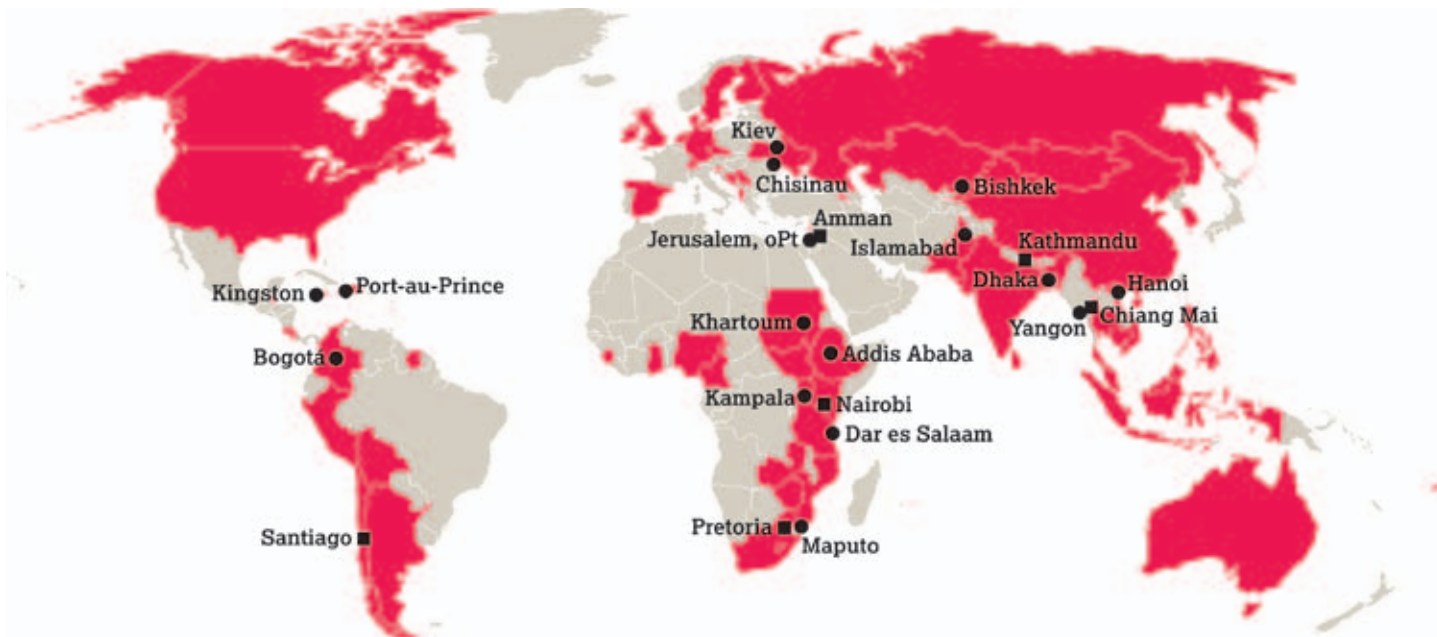
17. Transactions of related parties

	Year ended 31 March 2015 £000	Year ended 31 March 2014 £000
Age International		
Core grants for international programmes	8,050	8,501
Other grants for international programmes	4,742	2,533
	12,792	11,034

Legal and administrative details

Status	The organisation is a charitable company limited by guarantee, incorporated on 19 October 1983 and registered as a charity on 17 November 1983.	
Governing document	The Company was established under a Memorandum of Association, which sets out the objects and powers of the charitable company, and is governed by its Articles of Association.	
Company number	1762840	
Charity number	288180	
Registered office and operational address	1-6 Tavistock Square, London, WC1H 9NA	
Trustees	<p>Cynthia Cox Roman (<i>Chair</i>)</p> <p>Isabella Aboderin</p> <p>David Causer (<i>Vice Chair</i>)</p> <p>Mathew Cherian*</p> <p>Pham Hoai Giang*</p> <p>Cho Hyunse*</p> <p>John Kingston</p> <p>Laura Machado</p> <p>Sola Mahoney*</p> <p>Sanja Miloradovic*</p> <p>Du Peng</p> <p>Michael Wade</p> <p>John Jack Watters*</p> <p><i>*Trustees nominated by our Affiliates</i></p>	
Senior staff	<p>Toby Porter <i>Chief Executive Officer</i></p> <p>Justin Derbyshire <i>Director of Programmes</i></p> <p>Alison Gordon <i>Director of Resource Development (until May 2015)</i></p> <p>Jane Scobie <i>Director of Advocacy and Communications</i></p> <p>Asif Sarwar <i>Director of Finance / Company Secretary</i></p>	
Bankers	Barclays Bank plc, 1 Pall Mall East, London, SW1Y 5AX	
Solicitors	Veale Wasbrough Vizards LLP, Second Floor, 3 Brindley Place, Birmingham B1 2JB	
Auditors	Sayer Vincent LLP, Chartered accountants and statutory auditors, Invicta House, 108-114 Golden Lane London, EC1Y 0TL	

HelpAge global network



Our international offices

HelpAge International regional offices

East, West and Central Africa
Nairobi, Kenya

Southern Africa
Pretoria, South Africa

East Asia and Pacific
Chiang Mai, Thailand

South Asia
Kathmandu, Nepal

Latin America and the Caribbean
Santiago, Chile

Eurasia and the Middle East
Amman, Jordan

HelpAge International country offices

Bogotá, Colombia

Port-au-Prince, Haiti

Kingston, Jamaica

Bishkek, Kyrgyzstan

Khartoum, Sudan

Jerusalem,
occupied Palestinian territories

Chisinau, Moldova

Yangon, Myanmar

Hanoi, Vietnam

Islamabad, Pakistan

Dhaka, Bangladesh

Addis Ababa, Ethiopia

Dar es Salaam, Tanzania

Kampala, Uganda

Kiev, Ukraine

Maputo, Mozambique

■ Countries with Affiliates

■ Regional offices

● Country offices

Our Affiliates

East, West and Central Africa

Current Evangelism Ministries (CEM), Sierra Leone
District Pastoralist Association (DPA), Kenya
Ethiopian Elderly and Pensioners National Association (EEPNA)
Fantsuam Foundation, Nigeria
HelpAge Ghana
HelpAge Kenya*
Kenya Society for People with AIDS (KESPA)
Mauritius Family Planning Association
Reach One Touch One Ministries (ROTOM)
Regional Centre for the Welfare of Ageing Persons Cameroon (RECEWAPEC)
Rift Valley Children and Women Development Organisation, Ethiopia
Sawaka-Karagwe (SAWAKA), Tanzania
Senior Citizens' Council, Mauritius
Sierra Leone Society for the Welfare of the Aged
South Sudan Older People's Organisation (SSOPO)
Sudanese Society for the Care of Older People (SSCOP)
Tanzania Mission to the Poor and Disabled (PADi)
Uganda Reach the Aged Association (URAA)

Southern Africa

Age-in-Action, South Africa
Association of Retired Persons Mozambique (APOSEMO)
Elim Hlanganani Society for the Care of the Aged, South Africa
HelpAge Zimbabwe (HAZ)
Maseru Women Senior Citizens Association, Lesotho
Muthande Society for the Aged (MUSA), South Africa
Senior Citizens Association of Zambia (SCAZ)
VUKOXA, Mozambique

Eurasia and the Middle East

Albanian Association of Geriatrics and Gerontology (AAGG)
Ardager, Kazakhstan
Center for Studies on Aging (CSA), Lebanon
Dobroe Delo, Russia
El-Wedad Society for Community Rehabilitation, occupied Palestinian territories
Mission Armenia
OSMIJEH, Bosnia and Herzegovina
Palestinian Center for Communication and Development Strategies (PCCDS)

Resource Centre for Elderly People (RCE), Kyrgyzstan
Second Breath, Moldova (Gerontological Association of Moldova)
Red Cross of Serbia
Turbota pro Litnix v Ukraini (TLU), Ukraine

East Asia and the Pacific

Centre for Ageing Support and Community Development (CASCD), Vietnam
China National Committee on Ageing (CNCA)
Coalition of Services of the Elderly (COSE), the Philippines
Council on the Ageing (COTA), Australia
Fiji Council of Social Services (FCOSS)
Foundation for Older People's Development (FOPDEV), Thailand
HelpAge Cambodia
HelpAge Korea*
Helping Hand Hong Kong, China
Instituto de Acção Social, Macau, China
Mongolian Association of Elderly People
National Council of Senior Citizens Organisations Malaysia (NACSCOM)
Office of Seniors Interests, Australia
Senior Citizens' Association of Thailand
Senior Citizens' Council of Thailand
Singapore Action Group of Elders (SAGE)
Tsao Foundation, Singapore
Vietnam Association of the Elderly (VAE)
WINGS, Singapore
Yayasan Amal USIAMAS, Malaysia
Yayasan Emong Lansia (YEL), Indonesia*

South Asia

Bangladesh Women's Health Coalition (BWHC)
Dhaka Ahsania Mission (DAM), Bangladesh
Gramin Vikas Vigyan Samiti (GRAVIS), India
HelpAge India
HelpAge Sri Lanka*
Pakistan Medico International
Resource Integration Centre (RIC), Bangladesh

North America

AARP, USA
HelpAge Canada*
HelpAge USA*
West Virginia University Center on Aging, USA

Latin America

Action Ageing Jamaica
ALA Dominicana, Dominican Republic
Asociación Gerontologica Costarricense

(AGECO), Costa Rica
Asociación Red Tiempos de Colombia
Asociación Mutual Israelita Argentina (AMIA)
Caritas Chile
Centro de Asistencia y Promoción Integral de Salud (CAPIS), Peru
Centro Proceso Social, Peru
CESTRA, Colombia
CooperAcción, Peru
Dominica Council on Ageing
Extended Care through Hope and Optimism (ECHO), Grenada
Fundación Horizontes, Bolivia
Fundación ISALUD, Argentina
Haitian Society for the Blind (SHAA)
HelpAge Barbados
HelpAge Belize*
HelpAge St. Lucia
Instituto para el Desarrollo de la Pesca y Minería (IPEMIN), Peru
National Foundation for Blind Care, Suriname
Old People's Welfare Association (OPWA), Montserrat
Sumaj Punchay, Bolivia
Peru Coordinating Group for Older People (Mesa de Trabajo)
Pro Vida Bolivia
Pro Vida Colombia
Pro Vida Perú
Reaching Elderly Abandoned Citizens Housebound (REACH), Dominica
Red de Programas para el Adulto Mayor, Chile
Society of St. Vincent de Paul, Antigua
St. Catherine Community Development Agency (SACDA), Jamaica

Western Europe

Ældre Sagen/DaneAge Association, Denmark
Age Action Ireland
Age International, UK
Caritas Malta
Centre for Policy on Ageing, UK
Cordaid, Netherlands
HelpAge Deutschland*
HelpAge International España, Spain*
Kwa Wazee, Switzerland
PRO, Sweden
Slovenska Filantropija/Slovene Philanthropy, Slovenia
The Union for Senior Services (Valli), Finland
WorldGranny, Netherlands*
Zivot 90, Czech Republic

* HelpAge sister Affiliates



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(Robin Wyatt/HelpAge International)

Back cover photo: HelpAge health clinic for indigenous
people in Colombia (Jonas Wresch/HelpAge International)

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