Are older people being heard?

The impact of COVID-19 on older people’s ability to exercise their voice

Findings, recommendations and key questions emerging from HelpAge’s voice survey and webinars
HelpAge International is a global network of organisations promoting the right of all older people to lead dignified, healthy and secure lives.

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Executive summary

HelpAge works to improve the wellbeing, enhance the dignity and amplify the voice of older people. Older people tell us that they value having their voices heard and being able to participate meaningfully in decisions that affect their lives. Yet during the COVID-19 pandemic, for many older people, this has been a struggle. As the virus continues to exert a disproportionate impact on older people, exposing them to higher risk of serious illness and death, the measures and restrictions put in place to respond to the pandemic are also exacerbating pre-existing inequalities and power imbalances that disadvantage older people.

The effects of lockdowns, physical distancing and other isolation measures are taking their toll on older people’s health and wellbeing, impacting on their food and income security, and increasing the risk of them experiencing discrimination, violence, abuse and neglect – and ultimately exclusion and the denial of their rights.

To help understand how the COVID-19 context is affecting the voices of older people, HelpAge conducted a survey of organisations working with older people, over June–July 2020, to explore the impacts and opportunities emerging. Given the difficulty of accessing older people directly during lockdowns, the survey was targeted at HelpAge staff, network members and partners working with older people at global, national and community levels across Africa, Asia, Eurasia and Middle East, Europe, Latin America and the Caribbean. A series of regional webinars were held in September 2020 to share and discuss survey findings with those organisations who responded. The survey and webinars were structured using HelpAge’s Voice Framework, outlined in this report, which also informed the analysis and recommendations.

It is clear from the information gathered from the survey and webinars that COVID-19 is having profound impacts and creating challenges for older people to raise their voices and be heard. The report outlines how groups of older people who were already facing challenges to raise their voices and be heard are being further marginalised and disenfranchised by the pandemic and the way in which governments and other power holders are responding. This is affecting both the motivation and capacity of older people to engage meaningfully in all domains of voice-related activity, whilst also impacting upon the ability of organisations working with older people to continue to provide opportunities and support for older people’s participation.

Yet the survey and webinars also revealed how the pandemic has created opportunities for older people and organisations that work with them to forge innovative solutions to ensure their voices are heard and that they can participate in, and actively shape, responses to the pandemic. Previous forms of engagement, for instance, are being adapted to the COVID-19 context and new ways of reaching older people and working with power holders are being explored.

Drawing on these findings, the report highlights opportunities for immediate action that actors working with older people can take to address both the challenges and opportunities as the pandemic continues to unfold, and explores how we can work together to ensure older people are included in efforts to respond, recover and build back better. These action areas focus on how to innovate to engage all older people, how to place rights and empowerment at the heart of voice activity, and the importance of establishing and strengthening the role of civil society in conducting voice-related activity in a context of reduced resources and restricted capacity. The report also poses learning questions for us all to consider and which we will use and continue to explore with network members and partners over the coming months through HelpAge’s global Voice Learning Group.

As the pandemic evolves to multiple crises beyond a public health emergency, HelpAge will continue to work with older people, network members, partners and others to better understand the challenges and opportunities emerging in relation to voice and to identify and strengthen our collective strategies to respond.

To stay relevant, we will need to adapt our strategies, partnerships and interventions to a new context so that we can more effectively support older people’s empowerment and ensure that their voices are heard in efforts to meet their needs and uphold their rights.
Older people tell us that they value being treated fairly, with respect and dignity, making their own decisions, having their voices heard, participating in their own and others’ development and having access to services that respond to their different needs. Yet for many older people realising this is a struggle – from making decisions for themselves within the family and going about their lives according to their own values and preferences, to ensuring they are included and able to influence change within social and political spheres at local, national and international levels.

At HelpAge, voice is used as an umbrella term to capture the areas of participation, empowerment, agency, autonomy and accountability. Our activity focuses on supporting older people to claim their rights, make choices and participate meaningfully in decision-making in all parts of their lives.

HelpAge’s voice framework (see Figure 1) outlines five domains of voice activity that reflect the work HelpAge and network members are engaged in, as well as evidence of good practice in strengthening older people’s voices at different levels. The domains relate to activity that supports older people’s voices to be Engaged, Informed and empowered, Shared and combined, Amplified, and Heard. Together, the activities seek to nurture older people’s ‘power within’ themselves and provide opportunities for the realisation of their collective ‘power with’ others so that they can claim their ‘power to’ effect change and be heard, and have influence, control and ‘power over’ other more influential people or institutions and over key aspects of their lives.

The framework recognises that individual and group characteristics – including age, gender and disability, as well as other characteristics and their interaction – profoundly affect an older person’s voice. It also recognises that voice activity takes place with complex contexts that affect success, that it is influenced by the capacity and willingness of key actors to engage in activity, and that it is shaped by the existence of and access to convening spaces and channels for voice.

Figure 1: HelpAge voice framework
2. COVID-19 and voice: HelpAge survey and webinars

The first case of COVID-19 was reported in China in December 2019. On 11 March 2020 the World Health Organization confirmed the outbreak was a global pandemic. By November 2020, over 50 million cases of COVID-19 had been reported in 215 countries worldwide and 1.2 million deaths had been recorded.1

In addition to the direct impacts of the virus and its radical reshaping of public health landscapes at both global and local levels, the effect of the pandemic and measures put in place to respond to it – including the introduction of emergency powers and lockdown measures by governments – are continuing to have devastating impacts upon the economy, jobs and the everyday life of individuals and societies. These impacts are exposing and exacerbating pre-existing inequalities and power imbalances. In many places, responses are also impacting upon human rights, including, but not limited to, those directly related to voice, governance and accountability.2

While not all older people are equally vulnerable to the virus, we know that those aged 60 and over are, on average, at higher risk of serious illness and death from COVID-19. Older people are also at significant risk from the secondary impacts of COVID-19, including the physical, mental and cognitive health and wellbeing risks of lockdown, physical distancing or other isolation measures; fear of contracting COVID-19 and its consequences; the impact on food and income security; increased risks of violence, abuse and neglect; and as a result of exclusion, discrimination and stigma.3

“I am an older person; I have many age-related diseases. It’s difficult for me to move around the house and I almost never go out. At first glance, when the pandemic began, it seemed that nothing had changed in my life. But now I live in constant fear and stress for my life, and the life of my loved ones.”

Klavdiya Kazakova, 79, Ukraine

“I stay at home. I haven’t been to any social activities such as wedding ceremonies, housewarming gatherings or any other social gathering. I’ve stopped going out completely.”

Suthon I-Kamnerd, 69, Thailand

“Are older people being heard?”

Foundation for Older Persons’ Development

HelpAge International
Are older people being heard?

Exploring the impact

To understand more about how this changing context is affecting the voices of older people, HelpAge conducted a survey between June–July 2020 to explore the impact of COVID-19 on older people’s ability to raise their voices and be heard, and upon the ability of organisations working with older people to carry out voice-related activity. Given the difficulty of accessing older people directly during lockdowns, the survey was targeted at HelpAge staff, network members and partners working with older people at global, national and/or local level, including during the COVID-19 pandemic, to enable us to capture both how the pandemic is affecting older people’s voices as well as the challenges facing organisations who work with older people and the extent to which they have been able to continue voice-related activity.

In total, 38 responses were received from 25 countries in six regions, including Africa, Asia, Eurasia and Middle East, Europe, Latin America and the Caribbean, and North America (see Annex 2 for full details on responses received). Following the survey, three webinars were held in September 2020 to share initial findings and to capture feedback.

The survey was structured by HelpAge’s voice framework, outlined on page 4, which was also used as a framework for the analysis and write-up of the findings.

“Since the virus outbreak, I listen to radio and watch television to follow the situation in the country. It’s stressful. There’s a lot of information and I can’t be sure which news [stories] are factual or fake. Information I have received has made me worried.”
Supin Kotapan, 67, Thailand

“Our income is greatly affected, we had to stop working. I know that this measure helps to prevent COVID-19, but unlike before, now we cannot buy what we want to eat. We have to be flexible, and almost every day we only eat vegetables. If confirmed cases continue to increase, the community quarantine might be extended, and that’s frightening because people won’t have any source of income.”
Lolo (Grandpa) Mario, 64, Philippines

“With the coronavirus crisis, we have found many cases of bullying against older people. Social media users are disregarding the feelings of older people. It has been said repeatedly that this virus only kills older people, but this is a big mistake because it can harm all people.”
Ahmed Al-Dahir, 60, Jordan

Since the virus outbreak, I listen to radio and watch television to follow the situation in the country. It’s stressful. There’s a lot of information and I can’t be sure which news [stories] are factual or fake. Information I have received has made me worried.”
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“Our income is greatly affected, we had to stop working. I know that this measure helps to prevent COVID-19, but unlike before, now we cannot buy what we want to eat. We have to be flexible, and almost every day we only eat vegetables. If confirmed cases continue to increase, the community quarantine might be extended, and that’s frightening because people won’t have any source of income.”
Lolo (Grandpa) Mario, 64, Philippines
3. Survey and webinar findings

This document outlines the findings from the voice survey and subsequent webinars and provides analysis of the key opportunities and challenges emerging for older people and organisations working with them. It considers the implications of the findings and poses questions for us all to consider as we work together to support older people to raise their voices and be heard during the ongoing pandemic, and as we seek to build back better.

The survey was conducted in June–July 2020 and, due to the rapidly changing situation, the impact of the pandemic is likely to have changed as countries experience peaks and falls in infection rates and as they adapt response measures. Nevertheless, we hope the findings offer insights into the emerging implications of COVID-19 for the voices of older people, as well as the challenges and opportunities older people and the organisations working with them are facing in relation to voice activity.

Wherever possible, we have tried to unpack the impact of COVID-19 on the voices of different groups of older people, including older women, and older people with disabilities, as well as those living in different settings and contexts. However, in most places, findings are generalised and will therefore not reflect the specific situation facing different groups of older people in different settings.

3.1 Context of voice activity

Social, political, legal, cultural, environmental, physical context

Social, political, economic, cultural, environmental and physical contexts and the extent to which legal rights frameworks exist and are effective all have implications for power-relations. This has an impact on older people’s ability to exercise their voice and be heard.

To understand more about how contexts are changing, the survey asked how older people’s ability to exercise their voices and be heard is being affected by COVID-19 and policy responses, as well as the impact of the pandemic on social norms, behaviours and attitudes.

COVID-19 and related lockdown measures were reported to have led to a complete cessation of voice activity in some contexts and a wide-range of new barriers to older people raising their voices both collectively and individually. However, this is not true in all contexts.

The survey and webinars highlighted how the extent to which older people are able to exercise their voices depends on a range of factors, including pre-existing challenges and how they have been affected by the pandemic, as well as emerging challenges.

The findings highlight that a lack of legal and policy frameworks for older people in many contexts is having a negative impact on how older people are included in policy and decision-making processes during the pandemic and the extent to which their rights and needs are being considered and addressed. Respondents also said top-down decision-making structures, a lack of mechanisms for older people to engage, and a general lack of understanding of older people and their needs among policy-makers were preventing older people’s voices being heard.

“It does not seem that current government policies take into account the voice of the elderly.”
Russia

“There are various levels of committees that are being initiated by government from grassroot to top-level but there are no older people representatives on them.”
India

“The policies are coming vertically from the government.”
Peru

“The fact that policy and interventions for older persons is not well understood by policy-makers at national and subnational levels, is a major concern with the continuous exclusion [of older people] in development, humanitarian and now COVID-19 responses.”
Africa region
Social and cultural contexts that shape attitudes and behaviours towards older people are also preventing them from being included and heard. People reported that older people’s needs are a low priority in some places, including amongst politicians and policy-makers, saying ‘culturally and politically older people are disregarded’, they are ‘excluded’ and ‘invisible’. Many respondents also reported the stereotyping of and discrimination against older people, as well as a ‘solidifying of ageist attitudes’. This was said to be related to older people being at heightened risk of serious illness and death from COVID-19, but also to miscommunication or misunderstanding that the virus is therefore only a threat to older age groups. As a result, older people were reported to be seen as a homogenous group. In some contexts, this has led to the use of age-based policy measures, including government- or community-enforced restrictions for older age groups.

“Older people in Kyrgyzstan, although considered and respected, are still not recognised as an active part of society. There is a stereotype that older people are passive, frail and dependent.”

**Kyrgyzstan**

“Both open ageism and inadvertent discrimination against older people are even more clearly evident than in more ordinary times. [There is also use of] aged-based restrictions.”

**Sweden**

“Ageism is worsening, as is violence, abuse and neglect.”

**Cameroon**

“Despite the issuance of guidelines allowing older persons to go out if deemed ‘indispensable’, many older persons are still complaining that they have been barred from getting out to do economic activities or buy essential needs. This is because many implementers at the local level have a different interpretation of what is ‘indispensable’, this resulted in the unequal implementation of policies.”

**Philippines**

Rights and voice are inextricably linked. Work to strengthen the voices of older people means strengthening older people’s rights at the same time. Survey respondents and webinar participants reported that lockdown measures are having a direct impact upon older people’s rights. These include rights directly related to voice, such as their right to participate in the community, their right to information and freedom of expression, their right to peaceful assembly and association, and their right to access justice. In a number of places, as a result of policy decisions being made during COVID-19 and/or how they are being implemented, respondents also reported risks to, or violations of, older people’s right to autonomy; their right to social protection and social security; their right to food; their right to work; their right to health; and their right not to be subject to inhumane or degrading treatment. Measures or policies based solely on age were also noted. Where these are having a negative impact on older people’s rights compared to someone of a different age, these were considered to be violating their right to be treated equally and to not be discriminated against.

Limited access to, and knowledge of, digital technology were frequently reported to affect older people’s voices – particularly in contexts where this has become a central means of communication and engagement. The issue is unpacked further throughout the report.

While most respondents focused on negative changes in context, some provided examples of the changing social and political environment creating opportunities in relation to voice, for example by leading to more government focus on older people or opening-up opportunities for civil society organisations (CSOs) to work with government. In Nigeria, a respondent noted, ‘the government is starting to pay more attention to civil society organisations’.
Capacity and willingness of key actors to engage in voice activity

The capacity and willingness of different actors to engage in voice activity is critical to older people being able to raise their voices and the extent to which they are heard.

Survey respondents and webinar participants reported that emergency powers and the use of mobility and physical distancing restrictions were leading to reduced willingness and capacity of older people to engage, and to reduced willingness and capacity among key actors to reach and work with older people. Even where it has been possible to adapt voice activity, participants reported that it is more resource, time and energy intensive.

“The COVID-19 outbreak exposed our limitations to reach older people, as no one was prepared for the confinement or lockdown rules, the disruption went down to community level, where social structures are no longer functioning as before [...] Civil society organisations that used to support older people’s activities are operating below their capacities or even not operating at all due to the state of emergency.”

Mozambique

“We need partnerships and funding to reach rural areas properly.”

Nigeria

“In some areas where meetings are already allowed as long as minimum health standards are observed, facemask and alcohol will be provided, and social distancing must be observed. It adds additional cost to the organisation conducting the meeting.”

Philippines

“Government lacks resources to respond to older people and civil society organisations.”

Russia

Capacity in regard to using digital technology was highlighted as a particular challenge both for older people but also for those working with them. In places, civil society has been able to adapt and innovate at speed, but even where this is the case there are clearly limitations.

“One of the obstacles that most affects awareness and capacity is gaps in access and management of new communication and information technologies. Access to digital tools, when it is not scarce, it is at least limited.”

Venezuela

“There is a lack of communication tools.”

Togo

The willingness and capacity of key actors to engage in voice activity was also reported to have been influenced by existing and/or shifting power-relations. In some contexts, respondents said that COVID-19 was highlighting and/or exacerbating existing gaps and challenges in systems, as touched on above, while others said that CSOs were in a weak position to be effective as a result of a lack of clarity in their role in emergency situations, an inability to engage effectively with government, or due to competition among them.

“[There is] a lot of competition and positioning among civil society organisations instead of complementing and strengthening one another to create higher impact.”

Nigeria

“Non-government organisations (NGOs) advocating human rights of older people did not speak with one voice, many were confined.”

Mauritius

“The authorities showed their unwillingness to cooperate with NGOs and the elderly.”

Russia
Despite these challenges, there were also a number of reports of successes in adapting and innovating in this new context. Activity has continued by adopting protective measures, by moving activity online, or by using alternative communication channels. In a number of places effective linkages and joint working with government, NGOs and CSOs has also been used successfully to continue voice activity and to build new alliances or capitalise on network approaches to strengthen capacity. Where older people’s associations (OPAs) exist, these are playing a critical role in strengthening the willingness and capacity of older people and civil society, including by making effective connections with government and other power holders.

“In communities where older people’s associations had been established, these structures have become handy in monitoring the situation of older persons and sharing the information with CSOs and government structures.”

Kenya

“During this pandemic, Coalition of Societies for the Rights of Older Persons in Nigeria (COSROPIN) has come to be recognised as the voice of older persons in the country. Government now involves the Coalition when it remembers to include older persons in decisions.”

Nigeria

Programme adaptation and emerging good practice is addressed in more depth below and older people’s willingness and motivation to engage in voice activity is considered further in the ‘Engaged’ section.

**Convening spaces and channels for voice**

Convening spaces refer to both the spaces where older women and men can meet, share and discuss their experiences and bring their voices together, as well as ‘state-citizen interfaces’ where older people can engage directly with decision-makers. Spaces include meetings, forums and debates, as well as engagement in formal or informal political processes. Channels for voice relate to the range of ways older people can communicate and amplify their voices, including the spaces mentioned above, but also different forms of media and digital tools. Lockdown and physical distancing measures have severely affected older people’s access to convening spaces as they traditionally rely on physically coming together for voice activity. While this has forced those organisations and older people who are able to engage online and/or through different mediums to do so, for those who lack access to and/or knowledge and confidence in using digital tools the shift has resulted in them being cut-off from voice-related spaces and opportunities altogether.

“The government declared a lockdown restricting social gatherings and community meetings. These were the forums where civil society and local governments would have vulnerable groups participate and have voice. Policy dialogues are virtually held and older people’s participation is hindered by the lack of phones or computers and internet connection.”

Uganda

“There are few spaces for participation because of quarantine and isolation.”

El Salvador

“Neither men nor women have spaces to express their claims, desires and demands.”

Venezuela

Faced with these challenges, respondents highlighted older people, CSOs and government or service providers creating or claiming new convening spaces, including using distribution of aid, cash transfers or food items as opportunities to continue to engage older people in voice activities. In other places, reports of older people inviting government and other power holders to virtual meetings or establishing groups on social networks or WhatsApp were reported, alongside the use of alternative channels including print newspaper, radio and social media. Examples are included in sections following.
Individual and group characteristics

Survey respondents and webinar participants highlighted the importance and impact of different characteristics and their intersection upon older people’s voices during the pandemic. Groups already marginalised prior to COVID-19 were said to be facing further exclusion.

Older women were reported to be more affected, especially those at heightened risk of experiencing violence, abuse and neglect due to lockdown measures. Other groups of older people highlighted included the oldest old, older people with disabilities, homeless older people, religious and ethnic minorities, immigrants, older people from lower social-economic groups, those who have less education, those who experience language barriers, those providing care and, more generally, those who do not have access to digital technology. Older people in remote, rural or insecure locations were also reported to be at heightened risk of exclusion as well as those living alone or without support, and older people in institutions, including residential and nursing homes. In some places, respondents also said that those who are not members of OPAs were at greater risk of exclusion.

“There is no deliberate or effective provision for the older population to be heard. Men are much better because they belong to more visible bodies from where they can speak.”

Nigeria

“While the [government] and World Health Organization asked the entire populace to use alcohol as a disinfectant, masks for protection and soap for hygiene, older women and men in indigenous population communities do not have the opportunity to access any of these.”

Philippines

“People from low socio-economic strata [are more excluded] due to their difficulty and often impossible access to a telephone or virtual communication.”

Colombia

“The isolation is affecting mostly older people who live alone or who lack communication channels.”

Peru

“Some older people, due to their gender or disability, were isolated with their aggressors during lockdown and unable to raise their voices to report them or escape from situations of violence. Furthermore, older people who belong to some ethnic groups, those who are members of indigenous communities, and those who live in remote areas do not have access to online communication platforms which would allow them to connect with others, including organisations and government entities.”

Venezuela

“Older people in care [homes] and hospitals, [are] totally isolated and with no voice at all.”

Italy

“Though all older people have had limitations to exercising their voice during the COVID-19 pandemic, older women have faced more limitations. Movement restrictions and closure of public transport with preference to riding [bicycles] has favoured the older men who may ride to response centres to voice particular issues and access services. Traditionally, many women in Uganda do not ride and therefore this has limited their movement.”

Uganda
3.2 Domains of voice activity

Below we consider findings related to the impact of COVID-19 on different types of voice activities. These draw upon the findings already mentioned but explore each in more detail, considering how they relate to different aspects of voice.

Engaged

This domain focuses on activity that supports older people to be able to say, “I am able and motivated to access and take part in activity that strengthens my voice and my rights regardless of my identity, individual or group characteristics, or the context in which I live.”

We asked survey respondents how older people’s motivation to engage or participate in voice-related activity has been affected by the pandemic. In many places, respondents and webinar participants said fear and panic was affecting older people’s motivation to engage. This was reported to be due to fear of contracting the virus itself and/or the way it has been communicated in the media, as well as fear and panic related to restrictions being enforced by governments or by communities and family members.

“When older persons are too safety conscious to come out to be heard. The majority support what those speaking out are saying but consider it an unnecessary health risk to be so exposed in a country with poor health care.”

Nigeria

Respondents said the pandemic was also increasing depression and loneliness among older people impacting upon their motivation or willingness to engage. In some places, as mentioned above, respondents said lockdown measures were increasing older people’s risk of experiencing violence, abuse and neglect, all of which can have a profound and long-lasting effect on the extent to which someone is able to exercise their voice and be heard.

“The propaganda of fear fundamentally prevents them from being able to engage in voice activities. They are concerned with safeguarding life.”

Venezuela

“COVID-19 has severely limited older people’s motivation to participate in voice activities. Many older people, especially those who are lonely, are in a depressed psychological state. […There is] stress and anxiety because of the pandemic and quarantine. Higher risks of violence, abuse and neglect in a lockdown with family members.”

Kyrgyzstan

Older people’s motivation to engage in voice activity was also reported to be affected by the fact that to engage in the current climate would, for many, mean doing so alone. In Italy, a respondent also noted that the lack of older people’s engagement in voice activity during COVID-19 was related to not recognising themselves as a group with specific needs, interests and rights.

It is clear too that the impact of COVID-19 on older people’s motivation and ability to engage has been compounded by external challenges and barriers highlighted in previous sections. These include resource challenges for those working with older people and multiple access issues related to both the restrictions in place and pre-existing barriers such as limited access to support, the accessibility of meeting places, and the manner in which meetings are carried out. Secondary effects of the virus and lockdown measures, including increased financial insecurity and lack of access to key resources were also reported to be having an impact upon older people’s engagement.

“COVID-19 seems to have shut down the voices of older people. Though their motivation to engage in activities remains, the fear of infection is very evident; coupled with lack of sanitisers and protective masks, high cost of travel; the older people seem to have their ‘hands tied’ […]. Many older people also lack cash to purchase batteries for radios, electricity or data for internet.”

Uganda
Amid these challenges, however, there were also reports of the current climate increasing older people’s motivation to engage in voice-related activity in some places, as well as older people and organisations working with them continuing to successfully support themselves and others to engage, including through innovation in the use of digital technology and promoting intergenerational work.

“Door-to-door continues to be an effective way to contact older people but all COVID-19 prevention measures must be observed, at least here older people can feel that they are not forgotten. […] Older citizen monitoring groups and older people’s associations actively try to engage with older people whenever appropriate.”

**Mozambique**

“Some organisations, both government and NGOs, promote issues of older people by various media channels. Some active and experienced older people gather information in relation to the COVID-19 impact on older people, influence decision-makers for the inclusion of older persons, mobilise NGOs and community members, raise resources for needy older persons and influence youths to give due attention to older persons.”

**Ethiopia**

“The older people have been talking about their confinement on the radio stations. There is no dedicated radio programme as such but people intervene whenever the radio opens to the public.”

**Mauritius**

“After the Enhanced Community Quarantine was declared in Metro Manila and entire Luzon island, a group of older persons decided to open a Facebook account/page called Seniors sa Panahon ng COVID. As of June, the page had almost 27,000 members. They have regular/weekly programmes via Facebook Live discussing older persons’ issues.”

**Philippines**

“There has reportedly been some increase in membership in pensioners’ organisations, although it is not yet known how much.”

**Venezuela**

“HelpAge has interacted with older people through the self-help groups’ WhatsApp chats and through intergenerational groups of young and older people.”

**Kyrgyzstan**

However, while the increasing focus on technology has emerged as an opportunity in some places, it is clear that this is only available, accessible and appropriate for voice activity for some groups of older people and that those for whom it is not, are being left further behind.

“The participation is minimal. In events [voice activities] that older people have participated [in], this has been enabled by civil society organisations working with older people who have provided platforms in [the] form of radio interviews, television and webinars. This has been limited to one or two older people in number but also to the elite group of older people.”

**Uganda**

“In many cases, for those who have access to forms of technology by telephone and computer and who also have access to the internet, it can be said that they are stimulated, but this population is less than 20%. The others continue in the invisibility in which they have lived for a long time.”

**Colombia**

“Technology is becoming extremely important in information and programmes. But there are serious limitations, especially in remote areas. This includes both literacy issues/challenges and infrastructure challenges.”

**India**
Informed and empowered

This domain focuses on activity that supports older people to be able to say, “I have access to information and knowledge related to my rights and entitlements and I have the resources, skills and confidence to claim these rights and to raise my voice”.

In the context of COVID-19, a key concern is how older people can access information and guidance related to the virus, response measures, and their rights and entitlements. This is critical to them being able to exercise their autonomy, to make choices about their own lives, with support if necessary, and to claim their rights.

Responses related to this domain of activity were mixed. In some contexts, survey respondents and webinar participants reported limited availability, accessibility and quality of information on COVID-19 for older people, and limited information on, or knowledge of, their rights – this was particularly the case for many of the groups outlined above. Issues identified included little information being provided by government, service providers or other power holders, as well as misinformation from a range of sources. Regarding access to information that was available, people reported material not being tailored to the needs of different groups, it only being made available online or through radio or television, and barriers such as language or literacy.

“In the pandemic, the isolation of the elderly from sources of information about their rights has increased, only those elderly who are active in social networks can learn something from peers online.”

Russia

“The main barriers are exclusive communication from the government and not adequate to the reality of the older people and disabled.”

El Salvador

“For some older indigenous women, they did not have any idea of what COVID is about. There was no information or educational materials about COVID written in a language and mechanism easily understood by them.”

Excerpt from a statement of a representative of an indigenous people community, submitted from the Philippines

“The information about COVID-19 is fragmented and worries older people. Many do not have access to information and third-person information is sometimes distorted.”

Kenya

However, in other settings survey respondents and webinar participants reported the existence of available, accessible and quality information coming from the government, CSOs, friends, families, communities, and OPAs or through partnerships and joint working between them. Both traditional methods of sharing information were reported, as well as innovative approaches to ensure greater reach, including: word-of-mouth and door-to-door where possible and with protective equipment as necessary and available; newspapers, television and radio; and using telephones and social media for those who had access to them.

“In the times of the pandemic, we were forced to resort to the mass media through network groups to bring information […] We promoted WhatsApp groups with information, education, orientation and access to opportunities.”

Peru

“Radio jingles have been developed targeting the rights and safety of the older persons and the society as a whole.”

Nigeria

“COVID-19 information and guidance is provided through radio, television, social media and printed awareness material. […] Messages are being translated into local language to be aired on the community radios, posters are also printed out in local languages and some of them are directly targeting older people’s audience. Older citizens monitoring group and OPAs are reaching older people in communities observing the COVID-19 prevention protocol […] Reports from the older people indicate that many have had access to the information especially through the radio whose reach is to at least 90% of the population.”

Uganda

“Involvement of peer educators support has worked well after training on the World Health Organization and Ministry of Health guidelines on preventing infection.”

Kenya

“[The government] adopted hotline numbers that can reach directly to older people. [The Prime Minister] has daily live discussions with frontline workers, elders and CSO volunteers.”

Myanmar
Shared and combined

This domain focuses on activity that supports older people to be able to say, “I have opportunities to meet with others, share my experiences and debate between ourselves. We are able to express our needs, identify solutions, and form a collective, legitimate and representative voice”.

Survey respondents and webinar participants reported that, with previous mechanisms and spaces for convening made inaccessible due to lockdown restrictions, and with limited non-physical alternatives, many older people do not have opportunities to share their experiences and combine their voices.

“Older people have limited ability to express their needs, identify solutions, or form a collective, legitimate and representative voice.”

Myanmar

“Containment prevents contacts to express themselves.”

Togo

In Mauritius, one survey respondent said that barriers to coming together had led to older people expressing themselves ‘separately as individuals, not as a form of collective’. However, another respondent in Mozambique reported that not being able to come together meant that some groups of older people have lost their ability to raise their voices at all as they rely on the presence of their peers to give them the confidence to speak.

“Older women usually sit together in community gatherings as a way of mutual support to voice issues, without peer support lonely women cannot voice grievances or issues in a ‘differently’ set-up environment.”

Mozambique

Where alternative mechanisms and spaces for older people to come together and discuss problems and identify solutions have been found or created in response to changing contexts, these have been initiated by both older people and organisations working with them, and have included efforts to collect information on older people’s concerns to share with others.

“Older persons have not formed any new collective, legitimate voice. However, existing coalitions and NGOs have been collecting stories of how the COVID-19 pandemic has been affecting older persons negatively.”

Nigeria

“In some countries like Tanzania, the District Forum for older persons and structures established in refugee camps in Kibodo seem to be doing well or better.”

Africa region

“Members of groups of seniors communicated with each other by phone, instant messengers, Skype [and] on social networks.”

Kyrgyzstan

However, there are clearly significant barriers for many – not only in accessing these forms of communication and media but also in having the knowledge and confidence to use them in such a way that enables them to effectively express their needs, identify solutions, and form a collective, legitimate and representative voice.
Amplified

This domain focuses on activity that supports older people to be able to say, “I have the opportunity to amplify my voice through a variety of channels and to join with others to campaign, influence agendas, and create movements for change”.

People reported that restrictions on older people coming together physically had resulted in older people not being able to amplify their voices due to many having limited access to, and knowledge of, alternative methods for collective action and campaigning, or other channels for raising their voices at greater scale. In addition, in some places, other communication methods that older people use for amplifying their voices had also been disrupted due to COVID-19.

“The traditional ways of raising voices by older people is through social groups, campaigns, dialogues. These are not possible with the restrictions in order to prevent infection.”

Uganda

“At the peak of the lockdown newspapers were out of the market so they did not have many opportunities to talk of their situation.”

Mauritius

This problem was said to be particularly problematic where organisations of older people or representative groups were not in place before the pandemic.

“There is no representative body able to really raise their voices, apart from pensioners unions.”

Italy

However, as in other areas, ways that activity had been successfully adapted to enable them to continue were highlighted, as well as reports of older people and CSOs findings innovative alternatives or capitalising on opportunities presented by the pandemic to find new entry points.

“Older people representatives in small numbers can be facilitated to communicate issues raised by fellow older people through radio, television and community radios. Civil society organisations especially age care organisations have supported older people to participate on discussion platforms. These older people representatives have been facilitated with travel costs to the radio or television [stations], and been provided with smart phones and data to engage on behalf of their fellow older people. With the population turning to use of these channels, the listenership has increased greatly and voices of older people will reach a bigger audience than before.”

Uganda

Where older people have access to, and knowledge of, digital technology, there were also reports of them using this to initiate collective online action.

“There is a great opportunity to interact with policy-makers if local communities are linked to the internet. During the World Elder Abuse Awareness Day event organised by Kenyan Government, older persons in the grassroots were able to participate and interact with the policy-makers.”

Kenya

In the Philippines, the Facebook group that was initiated by older people released and submitted statements to the Inter-Agency Task Force (IATF) demanding clear guidelines regarding the mobility restrictions on senior citizens under the different quarantine categories.

Continued activity by national NGOs working through networks of older people’s organisations was also highlighted as playing a critical role.

“AgeNet together with HelpAge developed a joint statement to governments, donors and agencies to recognise the heightened risk that older people face to their dignity and wellbeing in the coronavirus pandemic, to listen to their voices, and ensure they have equal access to prevention measures, support and services in all settings. The statement was signed by 15 ageing organisations and sent to the Kyrgyzstan government.”

Kyrgyzstan

“PRO Global/Pensioners without Borders have contact with Swedish pensioners’ organisations at national and local levels, and these are addressing voice in their advocacy work to influence policies.”

Sweden

Other reports highlighted older people speaking-up and amplifying their voices individually during the pandemic through letters to newspapers, calls to radio stations, calls to phone lines established by government and service providers, and through contacting NGOs and CSOs.
People also reported government, service providers and/or other power holders not being responsive to older people’s needs and right – including their right to equality and non-discrimination, their right to autonomy, their right to health and, in some cases, their right to life and their right not to be treated in an inhumane or degrading way. This situation has been compounded by a context in which there is limited transparency within decision-making and limited or no access to accountability, justice or redress mechanisms.

“The focus was mainly on providing basic support instead of properly addressing [older people] as rights holders.”

Ethiopia

“COVID-19 has separated the older people as rights holders from the rights providers. The rights providers rarely engage the older people in their homes, the older people have no means of transport in case there is need to move to courts, health centres or social service centres like sub-counties. This prevailing condition has hindered rights access by older people […] Their land has been grabbed, property sold and their health unattended to.”

Uganda

“Those who are 70+ are subject to more restrictions than others, while at the same time older women and men in care facilities are not given adequate treatment or moved to hospitals if they become ill whether or not it is known if they have actually contracted COVID-19. Many instead are given palliative care.”

Sweden

“Confinement measures have led to the violation of multiple rights, including health, work, being consulted, and in long-term care homes, as they are in isolation, it is difficult to verify under what conditions their residents are being cared for, a situation that may be masking situations of potential abuse and mistreatment.”

Venezuela

Heard

This domain focuses on activity that supports older people to be able to say, “My voice is heard through my active participation and influence in decision-making processes. Governments and other power holders are responsive to my needs and my rights, and I have access to mechanisms through which I can hold them to account”.

Many respondents and webinar participants reported that there were no opportunities for older people to participate and have influence in decision-making processes during the pandemic, with governments and others adopting top-down, centralised approaches that do not allow consultation with key stakeholders, including older people themselves. In some places, this extended to older people having no access at all to decision-makers, even at local level.

“Everything about older people is being said and done without their inclusion.”

Kenya

“The decisions made, without dialogue or acceptance by those affected, violate their rights to express an opinion, to protest, to ask. Their low relationship with technology, and in cases where there is no internet in their territories, this does not allow them to be listened to.”

Colombia

“Older persons or organisations working with older persons are not consulted and haven’t been involved in the decision-making or formulating of policies and guidelines involving senior citizens.”

Philippines

Sachin Shrestha/HelpAge International
In some places, however, there were reports of older people being able to engage effectively with government, officials or other power holders during the pandemic – particularly where pre-existing structures and relationships were in place, including national committees on ageing, older people’s forums and OPAs. In others, participants reported efforts by governments or officials to seek engagement with older people, including inviting them to join COVID-19 country response planning mechanisms. Some reported successes older people, and NGOs working with them, have had in creating or claiming spaces, including online, and finding new entry points to meaningfully engage power holders and forge relationships. However, as in other areas, these opportunities were reported to only be open to some older people, including more ‘elite’ groups who were already engaged in, or had access to, local or national structures, particularly older men, and those who had access to, knowledge of, and confidence in, using digital technology.

“The government of the country and also at the local levels involve older leaders, where they are organised in OPA or older people’s citizen monitoring groups […] The level of participation is based on the strength of their institutions and individuals. Men are more involved compared to women since most OPA leaders are men.”

Ethiopia

“The government’s policy response towards COVID-19 initially was not inclusive of older persons. Through our engagement with the implementing Ministry, COSROPIN was able to pinpoint the loopholes in their policy as it was not directly targeting older persons. COSROPIN was able to spearhead that advocacy that culminated in the distribution of palliative care support to older persons in the Federal Capital Territory.”

Nigeria

There were also reports of positive responses by governments, service providers, NGOs, and activity by older people focused on meeting the needs and rights of older people through varied initiatives, programmes and mechanisms, including local, national and international efforts targeted specifically at older people. Mechanisms to support older people to make complaints, seek redress and hold power holders to account were also described by respondents, including special hotlines established by government or other services providers, activity by older citizen monitoring groups, and joint action by OPAs, NGOs and CSOs. In addition to these, people reported broader inquiries into governments’ COVID-19 responses having been initiated by parliaments, key stakeholders or by the media.

“Through older citizens monitoring groups and local committees or CSOs engaged in humanitarian response projects that are being redirected to include COVID-19 response.”

Mozambique

“The House of Representatives will launch an inquiry into the confusion and delays that marred the distribution of cash and other government assistance by the Department of Social Welfare and Development (DSWD) to those affected by the COVID-19 pandemic.”

Philippines

“[T]here are ongoing journalistic and judicial investigations regarding nursing homes and their management.”

Italy

“There has also been some outrage due to Sweden’s chosen strategy to combat the virus, which has failed to adequately protect older people in care facilities, and also clearly perceived ‘older people/70+ people’ as a homogeneous group of frail people who are incapable of making decisions on their own behalf. The pensioners’ organisations as well as some researchers and older individuals are working to hold them accountable.”

Sweden
4. Reflections and areas for action

It is clear from survey respondents and webinar participants that COVID-19 is having profound impacts and creates challenges for older people to raise their voice and be heard. Pre-existing barriers and challenges related to national and local contexts; the capacity and willingness of key actors to engage; and access to convening spaces and channels for voice, all continue to be experienced and, in many places, exacerbated as a result of COVID-19, in addition to new barriers emerging. Those groups who were already facing challenges to raise their voices and be heard are being further marginalised and disenfranchised by the pandemic and the way in which governments and other power holders are responding to it. This is affecting both the motivation and capacity of older people to engage in all domains of voice-related activity as well as impacting upon the ability of organisations working with older people to continue to provide opportunities and support for older people to do so.

However, in this challenging context, it is also clear from the survey and webinars that innovative strategies to strengthen the voices of older people have been adopted in response by older people themselves, organisations working with them and, in places, by government and other power holders. In this section, we reflect on the assumptions emerging from this activity, recommend some immediate areas for action, and pose further learning questions for older people and those working with them to consider as we work together to ensure older people’s voices are heard as the pandemic continues and as we seek to build back better. In addition to drawing on the findings of the survey, this section also draws upon the results of polls taken in the webinars in which we asked people to prioritise areas for action followed by discussion of results. The results of the polls are presented in Annex 2.

While the recommendations for action can be taken forward by any actor working with older people, the learning questions will be explored by HelpAge’s global Voice Learning Group with interested network members or partners over the coming months.
### 4.1 Innovate to engage all older people

The survey and webinars revealed how COVID-19 is changing the way older people and those working with them are able to engage in voice-related activity. Previous forms of engagement are being adapted to the changing contexts at the same time as new ways of reaching and engaging older people are being explored – including using media such as radio and television and supporting the uptake and use of mobile and digital technologies. This has clearly been successful in some places but significant barriers to older people accessing and using mobile and digital technology with confidence have also been highlighted. This raises fundamental questions about the extent to which all older people can be supported to engage in different types of voice activity using these methods and ensuring nobody is left behind.

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<thead>
<tr>
<th>Implications and recommendations for action</th>
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<tr>
<td>HelpAge and network members need to share good practice in methods for engaging older people in the changing context of COVID-19, recognising that methods for engaging older people in activity that supports them to be informed and empowered will be different to those needed for activity focused on supporting them to amplify their voices or to hold power holders to account.</td>
<td>How can older people and those working with them work together to identify approaches for supporting older people to be able to engage in voice activity and to share good practice? What methods are needed for supporting older people’s engagement in different types of voice activity? What are the resource implications?</td>
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<tr>
<td><strong>Action</strong> Share good practice in methods for engaging older people in the changing context of COVID-19</td>
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<tr>
<td>Older people and organisations working with them need to invest in exploring how to adapt existing convening spaces to support engagement, alongside creating and claiming new spaces for older people to come together, with organisations working with them and with power holders – including those supported by digital technology.</td>
<td>What are the convening spaces open to older people and those working with them? How are these changing and how can we respond? How can we learn from other groups and also work with them to increase our strength and improve our responses to exclusion?</td>
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<tr>
<td><strong>Action</strong> Invest in exploring how to adapt existing convening spaces to support engagement, alongside creating and claiming new spaces for older people to come together.</td>
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<td>COVID-19 has led to the emergence of intergenerational approaches to strengthening opportunities for older people to engage in voice-related activity which should be built upon.</td>
<td>What good practice examples of intergenerational approaches to strengthening or enabling older people’s voice can be shared?</td>
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<tr>
<td><strong>Action</strong> Share and promote examples of intergenerational exchange to support older people’s engagement, as for example in Moldova where younger people have been working with older people to access and use digital technology.</td>
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<tr>
<td>The COVID-19 pandemic has led to some opportunities in terms of engagement but it is also resulting in the further exclusion of more marginalised groups of older people, including through the increased use of mobile and digital technology.</td>
<td>How can approaches to this best be tailored? What are the resource implications of this? To what extent should we be focusing our efforts on mobile and digital engagement? Whose responsibility is it to speed up closing the digital divide? What are the most effective influencing strategies with government and private sector? What do we need to change in terms of ways of working to anticipate and address further setbacks and inequalities of more marginalised older people?</td>
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<tr>
<td><strong>Action</strong> Tailor approaches so that they are accessible to different groups of older people in different contexts with different needs.</td>
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Evidence from the survey and webinars illustrates how the COVID-19 pandemic is highlighting, and in many places exacerbating, deep-rooted power and structural imbalances, inequalities, and discriminatory attitudes that older people face. This is increasing the risk of older people's rights being violated and directly threatens their sense of empowerment and dignity, as well as their independence and autonomy, all of which are fundamental to them being able to exercise their voice in all settings and at all levels. Findings also suggest challenges may be further exacerbated by older people's own sense of insecurity and vulnerability in the face of COVID-19.

In this context, survey respondents and webinar participants highlighted the lack of strong human rights frameworks within countries, and key stakeholders’ lack of knowledge in human rights-based approaches as a key challenge. The need for approaches that strengthen older people's own knowledge of their rights as well as their demand for power holders to uphold their rights were also highlighted. This was linked to the need to reshape approaches to voice and advocacy so that older people are at the forefront of activity as the agents of change, whilst also challenging the current narrative around ageing and stigma exacerbating exclusion.

### 4.2 Place rights and empowerment at the heart of activity

Organisations need to embed a rights-based approach into all activity, ensuring approaches help to nurture older people's empowerment and place older people themselves as the agents of change.

**Action**

Support older people's empowerment in different domains of voice activity in this new context – particularly where there may be barriers to people coming together with others physically.

The COVID-19 pandemic has highlighted the need for older people and those working with them to demand recognition and public articulation of older people's specific rights, have more access to information and knowledge of these rights, including in the context of COVID-19, and the confidence to claim them.

**Action**

Demand recognition and public articulation of older people's specific rights.

The COVID-19 pandemic has brought increased focus to the need for strong legal frameworks at national and international levels to protect and uphold older people's rights. Older people and those working with them need to seize this opportunity to progress the rights of older people.

**Action**

Strengthen rights instruments at all levels and make further progress on an international convention to protect the rights of older people.

Older people and those working with them need to review the deep-rooted power and structural imbalances, inequalities and discrimination faced by older people that have been emphasised by COVID-19 and create new strategies for tackling these.

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<td>Organisations need to embed a rights-based approach into all activity, ensuring approaches help to nurture older people's empowerment and place older people themselves as the agents of change.</td>
<td>What are the implications of this for how we work? What needs to change and how? How can older people's empowerment be nurtured in a context where many may feel more at risk and vulnerable, and in a context in which they may be facing more pronounced or different forms of ageism, and/or increased risk of their rights being violated? How best do we support older people's empowerment in different domains of voice activity in this new context?</td>
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<tr>
<td><strong>Action</strong> Support older people's empowerment in different domains of voice activity in this new context – particularly where there may be barriers to people coming together with others physically.</td>
<td>What methods do we know work in strengthening older people's knowledge of their rights and their confidence in claiming them? What opportunities/entry points does COVID-19 present for promoting knowledge and understanding of rights among those working with older people, including governments and other power holders?</td>
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<td>The COVID-19 pandemic has highlighted the need for older people and those working with them to demand recognition and public articulation of older people's specific rights, have more access to information and knowledge of these rights, including in the context of COVID-19, and the confidence to claim them.</td>
<td>What do we know from examples of policy and advocacy successes in strengthening older people's or other group's rights at national level that can be drawn upon during the pandemic and replicated in different settings? How can older people and those working with them use the focus on older people's rights that COVID-19 has brought to strengthen support for an international convention?</td>
</tr>
<tr>
<td><strong>Action</strong> Demand recognition and public articulation of older people's specific rights.</td>
<td>How and where can we begin this work? How do we ensure it is led by older people themselves and informed by their experiences and priorities? How do we harness the positive potential of alternative narratives and storytelling to shift mindsets and prejudices?</td>
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Evidence from the survey and webinars illustrates how the COVID-19 pandemic is highlighting, and in many places exacerbating, deep-rooted power and structural imbalances, inequalities, and discriminatory attitudes that older people face. This is increasing the risk of older people's rights being violated and directly threatens their sense of empowerment and dignity, as well as their independence and autonomy, all of which are fundamental to them being able to exercise their voice in all settings and at all levels. Findings also suggest challenges may be further exacerbated by older people's own sense of insecurity and vulnerability in the face of COVID-19.

In this context, survey respondents and webinar participants highlighted the lack of strong human rights frameworks within countries, and key stakeholders’ lack of knowledge in human rights-based approaches as a key challenge. The need for approaches that strengthen older people's own knowledge of their rights as well as their demand for power holders to uphold their rights were also highlighted. This was linked to the need to reshape approaches to voice and advocacy so that older people are at the forefront of activity as the agents of change, whilst also challenging the current narrative around ageing and stigma exacerbating exclusion.

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Further learning questions to explore

- What are the implications of this for how we work? What needs to change and how?
- How can older people's empowerment be nurtured in a context where many may feel more at risk and vulnerable, and in a context in which they may be facing more pronounced or different forms of ageism, and/or increased risk of their rights being violated?
- How best do we support older people's empowerment in different domains of voice activity in this new context?
- What methods do we know work in strengthening older people's knowledge of their rights and their confidence in claiming them?
- What opportunities/entry points does COVID-19 present for promoting knowledge and understanding of rights among those working with older people, including governments and other power holders?
- What do we know from examples of policy and advocacy successes in strengthening older people's or other group's rights at national level that can be drawn upon during the pandemic and replicated in different settings?
- How and where can we begin this work? How do we ensure it is led by older people themselves and informed by their experiences and priorities?
- How do we harness the positive potential of alternative narratives and storytelling to shift mindsets and prejudices?
4.3 Establish and strengthen the role of civil society

Findings highlight the range of challenges civil society is facing to effectively conduct voice-related activity in a context of reduced resources and restricted capacity. In places, survey respondents and webinar participants reported civil society being in a weak position to adapt to, or to navigate within this new context, particularly where they are not working together or where they have weaker relationships with government or other power holders.

Where organisations reported success in overcoming these challenges, they highlighted the importance of working with strong, often pre-existing and local structures, including those led by older people themselves; capitalising on both grassroot and national network approaches that increase civil society’s collective strength and voice; and successfully navigating the new context to continue or to build strong relations with government.

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<td><strong>Action</strong> Civil society organisations should reconsider their role in this changing climate and how they can most effectively support older people to exercise their voices and be heard.</td>
<td>How can civil society strengthen its own position in the current climate? What strategies are needed to effect positive change and to strengthen the voices of older people?</td>
</tr>
<tr>
<td>Civil society is stronger when it works together and where it is able to form broad coalitions for change, including those representing different interests or groups, and speak with one voice.</td>
<td>How do we support civil society organisations working with and advocating for older people to cooperate, coordinate efforts, and build strong partnerships and alliances for change? How best to build upon good practice in this area?</td>
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<tr>
<td><strong>Action</strong> Share and build upon good practice in creating partnerships among broader interest groups to improve our strength, reach and resource – as highlighted in the example of social protection, where organisations representing older people came together with youth, women’s and disability groups to secure positive change.</td>
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<td><strong>Action</strong> Build upon existing structures and networks of older people’s organisations, as this is key to success and sustainability, and support older people to mobilise from the grassroots up and create broad movements for change.</td>
<td>How can we strengthen existing local structures in the current climate? What resources and support are necessary now to help civil society and older people’s organisations to undertake activity on voice from the local level upwards and how do we secure them?</td>
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4.4 Engage constructively with government to shift power-relations

In many contexts, survey respondents and webinar participants highlighted how the current climate has exacerbated the existing structural exclusion of older people within decision-making through the adoption of top-down mechanisms that deny older people and the organisations working with them the opportunities to meaningfully participate and which fail to recognise and meet older people’s needs or uphold their rights. This has been compounded by a failure to recognise the role and value of older people as well as civil society organisations working with them.

However, where civil society and older people’s organisations reported having well-established and strong relationships with government, or where they have been able to work together and seize opportunities, they have clearly had greater success.

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<tr>
<td>Older people and the organisations working with them need to improve their tactics for engaging government and other power holders and strengthening relationships to ensure they are considered legitimate actors at policy level and not just as service providers. This will enable older people to be more systematically included in local and national policy agendas, including through their meaningful engagement in decision-making processes around the current pandemic and future crises.</td>
<td>How can we work together to strengthen older people’s and civil society’s capacity to engage successfully with government and to shift power relations? What are the barriers to this currently? Where there’s been success, how has this been achieved and how can it be replicated? What are the strategies for the short-term and the long-term?</td>
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**Action**
Build upon the range of opportunities and entry points the pandemic has opened-up for engaging government and power holders at different levels – from the local to the national and international.

What are the unique opportunities presented by the pandemic in different contexts? How can we most effectively use these to shift power? Where/when is it most effective to focus on local government or power holders and where/when national or international? Where should our priority be?
5. Looking forward

The findings from the survey and webinars highlight the challenges facing older people and organisation working with them to engage in activity that strengthens their voices during the COVID-19 pandemic. However, it also highlights opportunities for immediate action, further learning questions and potential areas for us all to focus on ensuring older people are included in response efforts and that their voices are heard as we seek to build back better.

As the pandemic evolves to multiple crises beyond a public health emergency, HelpAge will continue to work with older people, network members, partners and others to better understand the challenges and opportunities emerging in relation to voice and to identify and strengthen our collective strategies to respond.

To stay relevant, we will need to adapt our strategies, partnerships and interventions to a new context so that we can more effectively support older people’s empowerment and ensure that their voices are heard in efforts to meet their needs and uphold their rights.

The above learning questions will be taken forward by HelpAge’s global Voice Learning Group, with network members and partners who are keen to learn and/or have relevant learning and experience to share, as only collective thinking and action can help get the traction that is so necessary.
Annex 1: Survey questions

1. Generally, how are current government policy responses to COVID-19 impacting the way older people can exercise their voice (e.g. to speak out on issues affecting them or be included in decision-making, planning or implementing response measures)?
What are the differences between men and women or other expressed identities?

2. How are other factors in your context impacting on older people's ability to raise their voice and exercise their agency during the COVID-19 pandemic?
These may include social norms and social behaviours, political policies or practices towards older people, including infringements on older people's social, economic, civil or political rights, or physical isolation, leading to invisibility or risk of abuse.

3. How has the capacity of civil society organisations, government or other service providers to engage directly with older people been affected?

4. How are older people engaging and participating in voice-related and rights-based activities during the COVID-19 pandemic (if at all)?

5. Which older people are being left out or face additional barriers to exercising their voice during the COVID-19 pandemic?
These barriers may relate to one or multiple characteristics: age, gender or sexual preference, disability, ethnic background, or other.

6. How has COVID-19 affected older people's motivation to engage or participate in voice activities?

7. How is older people's access to information and knowledge related to their rights and entitlements being affected by the COVID-19 context?
For example, are older people aware of:
a. their rights and how they can claim them
b. how and where to access benefits and support
c. how to make a complaint, or
d. how they can influence processes that impact their lives?

8. How accessible is COVID-19 information and guidance to older people?

9. How has the COVID-19 pandemic affected older people's ability to express their needs, identify solutions, or form a collective, legitimate and representative voice?

10. During lockdown or other measures imposed by governments in your context, what opportunities are there for older people to communicate and share opinions and demands?
These may include online spaces, radio, community networks relaying the voice of older people, etc.

11. How are decision-makers responding to the needs and rights of older people during the COVID-19 pandemic?
How are they being held to account?

12. Are governments or other service providers actively involving older people in decision-making processes that affect their health, life and prospects of re-establishing social, economic and political life (at community, provincial and/or national levels)?
If so, how?

13. What examples of good practices to mitigate against the negative impacts of any restrictive measures on older people's voice have you observed during the COVID-19 pandemic?
This might include alternative ways of engaging older people, adaptations to information sharing, or promoting more inclusive responses.

14. What challenges are you facing in adapting your voice-related activities with older people and what support do you need?

15. What lessons have you learnt in relation to voice work during the COVID-19 pandemic that you would like to share, or do you have any other observations that might assist with this survey?
Annex 2: Breakdown of survey respondents

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<thead>
<tr>
<th>Country</th>
<th>Organisation</th>
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<tbody>
<tr>
<td><strong>Africa</strong></td>
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<tr>
<td>Cameroon</td>
<td>Cameroon Association for Elderly Care (ACAMAGE)</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>HelpAge International Country Office</td>
</tr>
<tr>
<td>Kenya</td>
<td>HelpAge International Africa Regional Office</td>
</tr>
<tr>
<td>Malawi</td>
<td>Malawi Network of Elderly Persons Organisations (MANEPO)</td>
</tr>
<tr>
<td>Mauritius</td>
<td>Droits Humains Ocean Indien (DIS-MOI)</td>
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<tr>
<td>Mozambique</td>
<td>HelpAge International Country Office</td>
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<tr>
<td>Nigeria</td>
<td>Coalition of Societies for the Rights of Older Persons in Nigeria (COSROPIN) (x2 responses)</td>
</tr>
<tr>
<td></td>
<td>Graceful Ageing Fellowship (GRAF) (COSROPIN member)</td>
</tr>
<tr>
<td></td>
<td>Elder Care and Development Center (COSROPIN member)</td>
</tr>
<tr>
<td></td>
<td>Sanitation and Hygiene Education Initiative (COSROPIN member)</td>
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<tr>
<td></td>
<td>Teggow Obase Nkami Global Foundation (COSROPIN member)</td>
</tr>
<tr>
<td></td>
<td>Lemon &amp; Feathers (social enterprise promoting care of older people)</td>
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<tr>
<td></td>
<td>Save Our Heritage Initiative</td>
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<tr>
<td></td>
<td>New Dawn Disability Rights Initiative (NDDRI)</td>
</tr>
<tr>
<td></td>
<td>Confluence of Rights (CoR)</td>
</tr>
<tr>
<td></td>
<td>University of Abuja Teaching Hospital</td>
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<tr>
<td></td>
<td>Lagos State University</td>
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<tr>
<td>Togo</td>
<td>Univers de Solidarité et de Développement (UNI.SOL.D)</td>
</tr>
<tr>
<td>Tanzania</td>
<td>HelpAge International Country Office</td>
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<tr>
<td>Uganda</td>
<td>Grandmother's Consortium</td>
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<td><strong>Asia</strong></td>
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<tr>
<td>Myanmar</td>
<td>HelpAge International Country Office</td>
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<tr>
<td>Philippines</td>
<td>Coalition of Services of the Elderly (COSE)</td>
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<tr>
<td>Vietnam</td>
<td>Vietnam Association of the Elderly (VAE)</td>
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<tr>
<td><strong>Eurasia and Middle East</strong></td>
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<tr>
<td>Jordan</td>
<td>HelpAge International EME Regional Office</td>
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<tr>
<td>Russia</td>
<td>Regional Public Foundation Assistance for the Elderly (Dobroe Delo)</td>
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<td>Serbia</td>
<td>Red Cross of Serbia</td>
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<td><strong>Europe</strong></td>
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<tr>
<td>Italy</td>
<td>HelpAge Italy</td>
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<tr>
<td>Sweden</td>
<td>Pensionärenas Riksorganisation (PRO Global)</td>
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<tr>
<td><strong>Latin America and the Caribbean</strong></td>
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<tr>
<td>Colombia</td>
<td>Consejo Distrital de Sabios y Sabias</td>
</tr>
<tr>
<td>Costa Rica</td>
<td>Asociación Gerontológica Costarricense (AGECO)</td>
</tr>
<tr>
<td>El Salvador</td>
<td>Asociación Fundación para la Cooperación y el Desarrollo Comunal de El Salvador (CORDES Foundation)</td>
</tr>
<tr>
<td>Paraguay</td>
<td>Central Association of the Retired Public Official and Teachers of Paraguay (Asociación Central de Funcionarios Públicos y Docentes Jubilados)</td>
</tr>
<tr>
<td>Perú</td>
<td>Peru Coordinating Group for Older People (Mesa de Trabajo de ONG’S y Afines sobre Personas Mayores – Mesa Perú)</td>
</tr>
<tr>
<td>Venezuela</td>
<td>Convite Asociación Civil</td>
</tr>
<tr>
<td><strong>North America</strong></td>
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<tr>
<td>Canada</td>
<td>HelpAge Canada</td>
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<tr>
<td><strong>Unspecified</strong></td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

| Total | 25 | 19 | 6 | 12 | 38* |

* Total number of responses was 38: 2 responses were received from 1 network member (COSROPIN, Nigeria). Responses that were unspecified have been added to the ‘other’ total.
Annex 3: Webinar polling

Webinar participants were given three stars and asked to prioritise three of the following areas for action by dragging their stars to their selected choices. Results for each webinar and the overall totals for each action area are given below:

<table>
<thead>
<tr>
<th>Area 1: Technology and innovation</th>
<th>Area 2: Evidence and advocacy for rights</th>
<th>Area 3: Policy and advocacy with older people</th>
<th>Area 4: Civil society strengthening</th>
<th>Area 5: Power relations with government</th>
</tr>
</thead>
<tbody>
<tr>
<td>Finding alternative and innovative ways to reach older people (technology, inter-social, inter-generational)</td>
<td>Document violation of rights but also good practices (health and care, freedom from violence and neglect but also voice and participation)</td>
<td>Develop policy and advocacy messages with older people and ensure they are part of decision-making structures</td>
<td>Create alliances and networks to leverage complementarities, speak with one voice and use diverse strategies towards similar goals</td>
<td>Establish new relationships with governments, as equal partners</td>
</tr>
</tbody>
</table>

| Asia and Europe | 8 | 5 | 11 | 7 | 7 |
| Africa and Eurasia and Middle East | 14 | 10 | 10 | 13 | 11 |
| Latin America and the Caribbean | 9 | 13 | 12 | 11 | 4 |

| Total for all regions | 31 | 28 | 33 | 31 | 22 |
Endnotes


Find out more:
www.helpage.org/coronavirus-COVID19