

# COVID-19: Building back better

How to engage with the UN's socio-economic response and recovery framework at country level



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## Introduction

COVID-19 has presented extraordinary challenges for countries all over the world. Governments are dealing with the double burden of managing a major public health crisis and stemming the spread of coronavirus, while trying to minimise the social and economic fallout from the pandemic. Many countries are also trying to manage ongoing humanitarian situations that will be exacerbated by the virus, exposing highly vulnerable people to further risk.

For many older people, the COVID-19 pandemic has exacerbated pre-existing inequalities, ageism, discrimination, abuse and violence and has disrupted income security. Analysis from the World Bank predicts that between 71 and 100 million people will be pushed into extreme poverty – living below a USD 1.90 a day – due to COVID-19<sup>1</sup>. Estimations by HelpAge based on World Bank data suggest that in Sub-Saharan Africa alone between 1.6 and 2.3 million more older people will face extreme poverty as a result of the crisis<sup>2</sup>.

Global problems require global solutions. To respond to the socio-economic impacts of the pandemic, the UN has published a framework for socio-economic response and recovery (*A UN framework for the immediate socio-economic response to COVID-19*), which will be operationalised by UN country teams in collaboration with governments in 162 countries in the next 12 to 18 months. This framework puts into practice the UN Secretary General's *Shared responsibility, global solidarity and urgent action for people in need* report on the same subject. The framework highlights the importance of assessing the impacts of COVID-19 on at-risk groups, and ensuring governments make progress towards the Sustainable Development Goals (SDGs).

## **Who this toolkit is for**

This toolkit has been produced to support HelpAge staff and Network Members to navigate national planning processes for COVID-19 recovery and engage with key stakeholders to ensure that older people are included, and their rights protected and upheld in the implementation of the UN's socio-economic framework. It is designed to support your initial engagement with stakeholders.

The toolkit includes entry points for engagement with stakeholders, key messages for advocacy with governments and UN officials and bodies and links to useful resources.

## The three pillars of the UN COVID-19 response

The UN's socio-economic framework is one of three pillars in the UN's efforts to support governments to respond to the COVID-19 pandemic. It sits alongside a health response, led by the World Health Organisation (WHO), and a humanitarian response coordinated by UN Office for Coordination of Humanitarian Affairs (OCHA).

1. **Health:** A health-focused plan which covers actions to prepare for and respond to the immediate health challenges due to the pandemic.

The main stakeholders for the *Strategic preparedness and response plan* are Ministries of Health, public health bodies, and representatives. Countries are encouraged to develop and implement a National Action Plan that applies the global guidance to the country situation. Guidance on what should be included is provided in accompanying documents, including the *Operational Planning Guidance to support Country Preparedness and Response* and the *COVID-19 Risk Communication and Community Engagement (RCCE) strategy*

2. **Humanitarian:** A humanitarian response plan which covers countries where there is an existing humanitarian response, such as a refugee response or environmental disaster, or where there is a high risk of significant humanitarian consequences due to the pandemic.

The *Global Humanitarian Response Plan* applies in 63 countries. The global plan includes three strategic priorities that should guide humanitarian responses in each country. In each country, national humanitarian response plans have been developed that align with the GHRP. These are led by the UN Humanitarian Coordinator (HC), or the UN Resident Coordinator in countries where there is no HC. Government disaster management departments are the main stakeholder on the government side and the humanitarian clusters are important stakeholders in the development, delivery and monitoring of plans. Where there is a refugee response in a country, UN High Commissioner for Refugees (UNHCR) is also an important actor.

### Case study: Influencing the Humanitarian Response Plan in Democratic Republic of Congo

DRC is one of the worst affected countries by COVID in sub-Saharan Africa.

In May, Anatole Bandu of HelpAge DRC, a member organisation of the HelpAge network, began advocating for a greater focus on older people in the humanitarian response in the country following HelpAge analysis on older persons not included in most at risk group in GHRP for COVID-19. He was previously part of the CSOs consortium that was engaged by the government to help in the fight to end Ebola, so he understood the impact advocacy could make in ensuring the inclusion of older people.

Anatole began by writing to the Humanitarian Coordinator in DRC to highlight the risk to older people and the need for specific action to support them and for their inclusion in the National HRP. Anatole also shared HelpAge COVID-19 resource materials as they were released. As a result, he was invited to present to the National Inter-Cluster meeting which coordinates action across all UN clusters. Anatole's presentation was clear and informative and was well received by the participants.

After the meeting, he was invited to provide feedback on the country's Humanitarian Response Plan. Anatole provided an overview of the risks facing older people, backed up with results from recent assessments and made clear recommendations. As a result, the 6-month update of Humanitarian Response

Plan in DRC was adapted to include his feedback. He continues to work with different clusters to ensure older people and those with disabilities are considered in the 2021 version of the plan.

Anatole's advice to other network members is to make yourself visible to the UN Resident Coordinators, so they include you in the various processes. He did this by inviting the humanitarian community to see the work that HelpAge DRC is doing for older people and those with disabilities.

3. **Socio-economic:** A longer-term recovery plan covering socio-economic issues, including economic recovery, social protection, and social cohesion.

This plan is led by UN Resident Coordinators (RC), supported by the UN Development Programme (UNDP) and involving all other UN agencies.

While this toolkit focuses in particular on the UN Socio-Economic Response Framework, the impacts of the pandemic on older people and appropriate actions should be considered across all three aspects of the response. These three pillars may be included in separate plans or consolidated into one national COVID-19 plan. UN Country teams are tasked with providing support to governments as they develop their COVID-19 national plans.

If you are interested in advocating around the health plan or humanitarian plan, contact us using the email addresses in the [Contact Us](#) section.

For a more detailed overview of the UN response to COVID and its pillars and initiatives, please see the report [United Nations Comprehensive Response to COVID-19: Saving Lives, Protecting Societies, Recovering Better](#) released in September 2020.

## Who to engage with

The most important policy makers to engage with are the UN Resident Coordinator, and the government ministry or ministries that will take overall leadership for socio-economic response and recovery.

### Engagement with UN country teams

#### *UN Resident Coordinators*

The UN Resident Coordinator is the best person to build a relationship with to influence the implementation of the framework at national level. [You can find a list of resident coordinators here](#). The Resident Coordinator is responsible for coordinating engagement with other UN agencies in country and can provide you with information on the different processes and their timelines within country that you can engage with.

You can also engage with other members of the Resident Coordinator Offices, which usually include five people responsible for work on strategic planning, economists, communications and advocacy, data and partnerships.

#### **Case study: Opening up a relationship with Rwanda's UN Resident Coordinator**

The president of NSINDAGIZA (a HelpAge network member) wrote to the UN resident coordinator in Rwanda to highlight the UN Secretary General's call to ensure that the response to COVID-19 respects the rights and dignity of older people and ask how these measures were being implemented through Rwanda's COVID-19 response. He received no response to the first two letters, but on the third attempt the UN Resident Coordinator responded with a letter outlining the subgroups that their office had set up to provide technical advice to various government departments to assist with the development of the National Economic Recovery Plan. The UN resident coordinator stated that they would continue to advocate for the implementation of the UN Secretary General's recommendations for an age-inclusive COVID-19 response, and the UN socio-economic framework for COVID-19.

NSINDAGIZA's advice to other network members is to remember that the UN structures differ from one country to another. For instance, in Rwanda it operates through one channel known as One UN. Find out who is in charge in your country and get in contact with them. And if at first you don't succeed, try again!

#### *UN country teams and mapping of vulnerable groups*

UN country teams conduct assessments to identify groups who are at risk of being left behind and must follow guidance from the UN Sustainable Development Group (UNDG) on how to engage vulnerable groups on their work. As part of this guidance, the UNSDG has distributed a [Checklist for a Human Rights-Based Approach to Socio-Economic Country Responses to COVID-19](#), which includes an annex with a checklist of potential actions, tools and resources to help countries include older people as a priority group<sup>3</sup>.

Use this checklist for the inclusion of older persons in the framework as an opportunity to remind Resident Coordinators that older people and people with disabilities must be included in their mapping of vulnerable groups and to encourage UN country teams to engage with older persons and organisations that

represent them. Ask your contacts how they are implementing the checklist and ensure those working on mapping are aware of the [UN Secretary General's recommendations](#) for an age inclusive COVID-19 response.

As the UN technical lead for the socio-economic framework, UNDP is working closely with UN country teams to develop socio-economic response plans in each country, which should be aligned with the objectives set out on the SDGs for a more equitable and sustainable recovery. UN country teams have been supporting governments to develop national response plans, 106 of which have been finalised and are working on another 20 which are underway.

In many countries they have also developed preliminary assessment reports to evaluate the socio-economic impact in each country and implement rapid solutions under a 'development emergency' mode. Some of these assessments are available [online](#). This exercise is done in conjunction with other relevant UN agencies, such as UN Women, UN Department for Social and Economic Affairs, UN Population Fund, UNICEF, World Food Programme, Food and Agriculture Organisation, International Labour Organization and others. International Financial Institutions, including multilateral, regional and national development banks and intergovernmental bodies, may also be involved<sup>1</sup>

The UNDP prepares the monthly briefs [Putting the UN Framework for Socio-Economic Response to COVID-19 Into Action](#) exploring latest trends and providing key insights and analysis on the socio-economic impacts of COVID-19 on economies and societies.

### Case study

In Mauritius, the UN resident coordinator was already well-aware of the effects of population ageing. To ensure high level engagement, she led a UNFPA delegation to the prime minister's office and promoted the wellbeing of older people as an essential part of government plans. A cooperation framework with UN members was set up, where various mechanisms for older people's wellbeing including the Mauritian Council of Social Services and the Mauritian Association of Senior Citizens were consulted.

COVID-19 brought more urgency to ensuring older people were a part of government plans. Because of previous work done, older people were included in emergency planning from the outset. This included door-to-door payment of pensions and priority access to various services for older people. Moving forward, the cooperation framework will continue to be implemented and work will be done on the socio-economic response. This work will be monitored through a high level COVID committee (which the WHO sits on), as well as fora for development partners, the private sector and civil society.

### Case study

HelpAge International's regional Africa office wanted to engage with the UN system and national planning around the socio-economic framework in the Gambia. Our board member, who lives in the Gambia, reached out to the local UNDP office to make a connection.

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<sup>1</sup> See Annex 2 of the socio-economic framework for a full breakdown of UN agencies involved

The communication was timely, as they were in the process of putting together a report on the socio-economic impact of COVID-19 in the country. The International and Regional Policies Coordinator assisted by the Global Advocacy Manager used the opportunity to analyse the report and give feedback.

The report was silent on older people's issues. While the majority of the team's suggestions and comments were not incorporated, older people and people with disabilities were mentioned as population groups at risk due to the likelihood of underlying health conditions. Our recommendation for age and disability disaggregated data to enable better understanding of vulnerable groups such as older persons, people with disability etc that are at risk was also incorporated. Whilst we would like to have seen more focus on older people, the incorporation of at least some of our suggestions will lead to more tangible policy actions to support older people in the pandemic.

This was also an opportunity to engage with the Gambia's National Human Rights Commission, which would like to increase its level of engagement on older people's issues and rights. The commission is currently exploring possibility of establishing a thematic committee on marginalised groups which will include older people.

Though the discussions are at their initial stages, suggestions have been made to the Commission on the need for the Thematic Committee to initially collaborate with government and other partners to undertake a situational analysis of older people and accelerate the ratification and implementation of the AU Protocol to the African Charter on Human and People's Rights on the Rights of Older Persons in Africa.

## Engagement with national governments

National governments have overall responsibility for implementing the socio-economic framework. UN agencies provide technical support and can help coordinate engagement with UN frameworks, but ultimately it is the national government that is responsible for upholding the rights of all its citizens.

Use your existing contacts to find out what mechanisms are being set up to integrate the socio-economic framework into national action plans. For instance, there may be dedicated taskforces or committees set up to lead on this.

You should directly engage with **economic and planning ministries** as they will hold overall responsibility for the implementation of COVID-19 response measures and for thinking about longer term recovery plans that are aligned with the SDGs.

## Other stakeholders

To have maximum impact, you can engage with and influence other parts of government and society to spread your key messages. For example:

- National human rights institution (NHRIs). They are independent from governments and can be instrumental in ensuring plans are in line with human rights standards
- Parliamentarians. They will likely be providing scrutiny on National Action Plans, so you can engage with Members of Parliament to be aware of the



need to uphold the dignity and rights of older people within plans, and encourage them to ask questions on your behalf

- National statistical offices. They may be responsible for measuring progress against the national plans. They can ensure that any data collected is disaggregated by age, sex and disability
- Development partners, such as the World Bank, International Labour Organisation and others
- Civil society. It may be more impactful to join forces with allies who are also advocating around the socio-economic framework.
- Older People's Associations can help to provide evidence by engaging with older people to support your advocacy

For more guidance on national government stakeholders, take a look at [Ageing and the SDGs – Six steps to older people's inclusion](#), which maps out government stakeholders on p.5 and 6.

### **Regional engagement**

The UN is establishing regional collaborative platforms to organise the regional level better. Issue Based Coalitions will focus on specific thematic area and could provide an entry point for engagement. These involve [UN Regional Economic Commissions](#), agencies, funds and programmes. The UN Development Coordination Offices together with UNDP and the regional economic commission are providing the secretariat. There are five DCO offices at the regional level, staffed by Regional Directors and their teams and based in Panama, Addis Ababa, Amman, Istanbul and Bangkok.

These regional issue based coalitions will focus on regional overviews of issues, from areas that require a collaborative approach to emerging issues in the region. We should encourage regional coalitions to consider the impacts of the crisis on the rights of older people and other at-risk groups.

Multilateral agencies such as the African Union and UN system may be responsible for capacity building within government for adequate implementation of the framework. It may work in your favour to engage with these bodies to influence information-sharing and training initiatives.

## Advocacy tactics

Decide which tactics are going to help you to begin initial engagement with stakeholders, and ensure you are consulted during national action planning processes. Make sure to use tactics as a vehicle to get across your key messages, which are outlined in the next section. Some ideas are included below:

- Write a letter to your UN Resident Coordinator asking more information about the implementation of the framework and how it is including older people (please see *Annex 1* for a template)
- Raise awareness of the challenges faced by older people by encouraging older people to write to decision makers or by inviting key stakeholders to visit one of your projects, whilst respecting physical distancing
- Engage with parliamentarians to ask questions during debates and scrutinise plans for the adequate inclusion of older people
- If you have completed a Rapid Needs Assessment in your country (or any other evidence-building initiatives), hold a physically distanced or virtual launch event and invite key stakeholders to share the main findings
- Write to your existing connections within UN agencies, civil society and government to find out more about how the response plans are being implemented in your country
- Create partnerships with other civil society organisations who may also be advocating for inclusion of at-risk groups into the response
- Invite older people to talk about their experiences of the pandemic with key stakeholders

## Key messages for advocacy

The framework is structured around five streams of work: protecting health services and systems; social protection and basic services; protecting jobs and small and medium sized enterprises, and workers in the informal sector; macroeconomic response and multilateral collaboration; and social cohesion and community resilience.

While older people are listed as one of the most at-risk populations experiencing the highest degree of socio-economic marginalisation (p.7) – and the Secretary-General clearly stated in his policy brief that older people should be included in socio-economic responses - the five streams of the framework do not mention older people at all.

This section outlines key messages for target stakeholders including governments, UN officials, UN bodies and data producers.

### Key messages for governments, UN officials and UN bodies

The following messages outline the essential steps that must be taken for older people to be adequately included in national plans, and for their dignity and wellbeing to be upheld. They are for use in your immediate engagement with these stakeholders in the coming months.

#### 1) Health first: protecting health services and systems during the crisis

The framework outlines a two-phase strategy to allow countries to maintain essential lifesaving health services and the recovery, preparedness and strengthening of health systems with a focus on primary health care and Universal Health Coverage (UHC) for future waves of COVID-19.

Older people faced barriers to accessing healthcare before the pandemic. For instance, a WHO study found that over 60% of people aged 60 and over in lower- and middle-income countries cited not being able to afford the visit as their reason for not accessing health services<sup>4</sup>. Physical accessibility and age discrimination are additional barriers, which have been exacerbated by the pandemic. Discriminatory age-based triage policies have been implemented in various countries to protect scarce resources<sup>5</sup>, and older people have reported being unable to access healthcare services for pre-existing conditions<sup>6</sup>. Alarmist messages about the risks of COVID-19 for older people and the need for them to stay at home has also led to increased fear and anxiety among older people about going to health facilities to access ongoing health services.

Governments, UN officials and UN bodies including multilateral agencies must:

- Recognise older people as a key risk group in the pandemic and ensure outbreak responses and health services are targeted to their needs
- Ensure guidance on triage and triage protocols themselves are based on clinical assessment, medical need, scientific evidence and ethical principles, and not on non-medical characteristics such as age or disability
- Reduce financial barriers to health services for older people, including fee waivers and the provision of free transport to health facilities
- Provide guidance on how to maintain NCDs prevention, diagnosis, treatment, management and care as an essential health service, and ensure older people have access to this service

- Ensure data systems and tools for rapid impact assessments are inclusive of older people and disaggregate data by age, sex and disability at a minimum
- Any training provided to the health workforce to build capacity to respond to COVID-19 must include content on the specific care needs of older people, including care needed in relation to specific underlying health conditions and the risks these pose for COVID-19 health outcomes
- Ensure any strategies to strengthen the health workforce through bringing back retired health professionals, are strictly voluntary given the higher risks for older people, and that full personal protective equipment (PPE) and accompanying training are provided
- Provide health services as close as possible to older people at the community level, including through outreach and door to door services to minimise any unnecessary visits to health facilities, for example, for collection of routine medicines
- Work with older people's organisations to map need for support from health facilities at the community level and ensure the provision of information in accessible formats that respond to literacy levels, language barriers or disability.
- Develop models of UHC that are holistic, person-centred and integrated across health and care and support systems and that define services for inclusion in UHC that are age-specific and responsive to the needs of older people.
- Establish and strengthen health systems that provide palliative care
- Make public health information accessible and relevant to all, including information about how COVID-19 is transmitted and treated, how to prevent infection, and any upcoming vaccination efforts
- Ensure Ministries and agencies consult with and involve older people in health policy processes.

## **2) Protecting people: social protection and basic services**

The framework states several areas where the UN will support governments to adapt, extend and expand social protection and social services. It recognises that an "an extraordinary scale-up" of social protection is urgently required to protect populations from the severe impacts of the pandemic on incomes, livelihoods and access to vital services. It also states that cash transfers, food security programmes and support to victims of gender-based violence (GBV) will need to be scaled up.

### *Food security*

HelpAge International and partner organisations across the global network have conducted a series of Rapid Needs Assessments (RNAs) to analyse both the primary and secondary impact of the COVID-19 pandemic on older people around the world<sup>7</sup>. One of the key concerns for older people that has emerged from the findings is food security.

Governments, UN agencies and multilateral bodies must address this both in the COVID-19 response, and in the recovery:

- Increase unconditional cash transfers and financial support to immediately address food insecurity. These should target older people who have

disabilities, chronic disease and/or mobility issues, as well as those living alone

- Ensure proper collection, use, and analysis of sex, age and disability disaggregated data enable to deliver effective support

### *Social protection*

Older people often rely on multiple income sources including paid work, savings, financial support from families and pensions. However, the pandemic means family members may not be able to provide support, and many older people may not be able to engage in their own income-generating activities because of risk of infection or lockdowns. Older people often work in the informal sector, which provides little protection against income shocks, like the pandemic. Only 22 per cent of older people in Sub-Saharan Africa receive a pension and only 23 per cent in South Asia.<sup>8</sup> Older women are even less likely to have a pension, and often arrive in older age with fewer savings and assets.

Governments have rushed to expand and strengthen social protection systems in response to COVID-19. However, older people are often not a priority. Of the almost 1,300 reforms to social protection systems undertaken by July 2020, only 6 per cent relate to pensions, and only some of those actually increase coverage or benefits for older people.<sup>9</sup>

To ensure older people have access to social protection and social services, government, UN officials, UN bodies and multilateral agencies must:

- Include older people in all relevant socio-economic assessment and clearly recognise the impacts of the crisis on the wellbeing of older people, analysed through an age, disability and gender lens
- Put special emphasis on social pensions as the most effective way to provide income security to older people and their households, and call for the establishment of universal social pensions to reach all older people, especially in low-income countries where pension coverage is low
- In countries with no social pensions, support governments to establish them, which will provide a secure income for older people and their households, which often consists of grandparents providing care to orphans and vulnerable children
- Where social pensions exist but do not reach all older people, support governments to expand their coverage, for instance by immediately bringing in all older people on waiting lists into the pension<sup>2</sup>, making a poverty-targeted pension universal in the hardest-hit parts of the country<sup>3</sup>, expanding into new districts<sup>4</sup> or lowering the eligibility age to reach more older people<sup>5 10</sup>
- Where social pension amounts are too low to provide meaningful income protection to older people during COVID-19, support governments to temporarily or permanently increase transfer levels<sup>6</sup>

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<sup>2</sup> For instance, in Sri Lanka and Costa Rica

<sup>3</sup> For instance, in Bangladesh

<sup>4</sup> For instance, in Uganda

<sup>5</sup> For instance in Myanmar (but only as a one-off grant)

<sup>6</sup> As of August 2020, 34 countries have increased pension transfers in response to the crisis and 6 have expanded pension coverage <http://www.pension-watch.net/knowledge-centre/?guid=5ee3a70aef9c8&order=n>

- Where emergency cash transfers are provided to broad segments of populations affected by COVID-19, ensure that older people know about them, are aware of their entitlements to benefit and how they can register. Ensure that these cash transfers are accessible for older people, especially older women and those with disabilities, from outreach to registration to receipt of payments.

### *Gender-based violence*

Violence, abuse, and neglect of older people has been rising, with global estimates before the COVID-19 pandemic suggesting that 1 in 6 older people were subjected to some form of abuse<sup>11</sup>. Emerging data shows that since the outbreak of the virus, violence against women especially has intensified.<sup>12</sup>

Restrictions on movement to control the spread of the virus can increase the risk of violence and make it more difficult and dangerous to seek help. Older people who are in isolation with family members or caregivers (including within long term care facilities) face higher risks of violence, abuse and neglect, compounded by increased anxiety and stress levels and economic hardship. Those at higher risk include older people, especially older women, those living with disabilities or receiving care and support for independent living. COVID-19 has led to staff reductions in long-term care facilities, due to illness or self-isolation, and the suspension of family visits, increasing the isolation of residents and the risk of abuse and neglect.

The risks are further aggravated by fewer police interventions, limited access to justice and support services for survivors, and reduced access to health services. Many service providers have had to curtail their services or shift to online or telephone provision. Older people face barriers to accessing trustworthy information using newer technologies, including the internet.

To ensure support to survivors of gender-based violence, governments, UN agencies and multilateral bodies must:

- Specifically recognise older people as at risk of violence, abuse and neglect during the pandemic. Include and adequately resource prevention and response measures in national COVID-19 response plans and risk mitigation communication. Support services for older survivors must be categorised as essential and lifesaving
- Inform older people and community members about the availability of support services via multiple channels (e.g. radio, television, notices in grocery shops or pharmacies) and in accessible formats that respond to literacy levels, language barriers and disabilities
- Inform essential service providers in the community (home-based carers, first responders, delivery services) about signs that indicate violence, abuse or neglect and what to do if help is needed by an older survivor
- Helplines should be established where they do not exist or supported to remain functioning where they do. Helplines should be free and accessible to older survivors with multiple means of contact, including through phone, text message, online chat, or silent calls
- Support services must be maintained despite physical distancing measures. Make sure remote support services are accessible to and inclusive of older survivors and address the specific barriers faced by older women and men (for instance, lack of access to digital technology)

- Build capacity of key service providers to identify and respond to cases, and improve quality of support within service provision to older survivors e.g. through virtual multidisciplinary teams, including care providers, healthcare and social workers, the judiciary and law enforcement
- Track and update information about referral pathways for support services for older survivors (e.g. legal services, sexual health services etc) and share this with service providers across sectors
- Ensure long term-care facilities have policies and procedures on how to prevent and respond to violence, abuse and neglect, including training for staff on recognising the signs and knowing how to report.

### **3) Economic response and recovery: protecting jobs, small and medium-sized enterprises, and vulnerable workers in the informal economy**

The framework states a focus on improving the productive sectors, protecting jobs and promoting decent work.

Many people continue to work in older age. In low and middle-income countries, older people's work is mainly in the informal economy.<sup>13</sup> When older people are formally employed, it is likely on a temporary or part-time basis<sup>14</sup>. Such employment tends to yield lower and more irregular incomes and does not provide social protection or ensure health and safety in the workplace.<sup>15</sup> Together with ageism – which evidence shows can increase during an economic crisis<sup>16</sup> – such precarious employment puts older people at a disadvantage. Evidence from previous crises suggests that older people are often the first to lose their jobs and the last ones to re-gain employment.<sup>17</sup> There is also evidence that older workers are more likely to face persistent declines in job quality after re-employment.<sup>18</sup> Older people's elevated health risks could also lead to forced retirement, being prevented from going back to work – or choosing to stay home.<sup>19</sup>

Losing jobs and livelihoods, or seeing hours and incomes reduced, will have immediate negative impacts of older people's ability to meet their needs, undermine their income security in the longer-term, and potentially threaten older people's dignity and enjoyment of human rights. The ILO, therefore, warns that older workers, as well as younger workers and those in less protected and low-paid jobs will be disproportionately affected by the looming jobs crisis.<sup>20</sup>

Beyond providing income for older people and their dependents, decent work can also be a source of dignity, self-esteem and a sense of purpose and belonging.<sup>21</sup>

To effectively mitigate the risk of socio-economic marginalisation for older people, governments, UN agencies and multilateral bodies must:

- Recognise that many older people rely on income generating activities and work for their survival and the ability to support those in their care, and that older people work mainly in the informal economy, which has been hardest hit by the pandemic
- Ensure access to appropriate social protection and health and safety measures for older workers, especially those working in the informal economy.<sup>22</sup> This means:
  - Reducing the exposure of older workers and their families to the virus and the risks of contagion
  - Ensuring older workers who contracted the virus have access to adequate health care and support

- Including older workers in income support measures to compensate the loss of, or reduction in, work, such as sickness and unemployment benefits and other cash transfers
- Recognise that older people may require dedicated interventions to maintain or gain new work, and implement active labour market policies targeted towards, or inclusive of, older people
- Mitigate the risk of age discrimination and ban mandatory retirement to ensure that older people have equal access to employment opportunities.
- Protect agriculture as a major source of income for older persons

#### **4. Macroeconomic response and multilateral collaboration**

The framework flags the impacts this crisis has had on the global economy and the major implications for at risk population groups and households. It also calls for a massive fiscal and financial effort and multilateral response to limit the impacts on these groups. Older people are disproportionately affected by the medium and long-term consequences of the crisis, such as increased inequalities and poverty rates.<sup>23</sup>

As mentioned above, older people's income and standards of living have been impacted by the pandemic, due to insufficient provisions during lockdown, disruptions to social pensions payments, the impact of lockdowns on the informal economy, lack of access to cash transfers or food.<sup>24</sup>

The socio-economic response to COVID-19 must be fair and ensure social and environmental sustainability as outlined on the 2030 Agenda and the SDGs, which is based around the promise to 'leave no one behind'. That means people of all ages, including those of an older age, must benefit from the economic recovery and efforts to 'build back better' from the pandemic.

Additionally, the Framework states a commitment to use the UN Development System's convening power, at national, regional and global level, to facilitate dialogue between various stakeholders to adopt common positions and responses to COVID 19 socio-economic impacts.

To ensure older people can contribute to and benefit from the macroeconomic response, governments, UN agencies and multilateral bodies must:

- Consider the rights and needs of older persons when making crucial increased investments to move towards universal health coverage and social protection systems
- Ensure all assessments and policy responses are participatory and based on inclusive social dialogue as well as sensitive to gender, age, and disability
- Ensure Regional Collaborative Platforms engage with civil society, as well as include the input and listen to the recommendations from organisations that work with older people in their respective regions
- Include older people, OPAs and other organisations that represent them in national stakeholder dialogues and multi-stakeholder engagement plans, as well as in opportunities for financial support.

#### **5. Social cohesion and community resilience**

The framework outlines specific areas where the UN Development System can support governments to (re)build social cohesion, including facilitating inclusive social dialogue and political engagement; empowering community resilience,



participation, and equitable service delivery; and supporting to governance, fundamental freedoms and the rule of law.

Many older people may already lack the opportunities to exercise their voices. Disasters and emergencies, conflict and crisis can dramatically alter their ability to be heard, as does shrinking civic space. Ageism can be a major barrier to the ability to exercise voice, both in terms of the stereotyping of older people as unable to contribute, and through internalised ageism where older people may exclude themselves. This can be exacerbated by barriers associated with intersecting identities, such as having a disability, gender, class, religion, ethnicity or sexuality.<sup>25</sup>

Ageism has been exacerbated in the COVID-19 pandemic, with some decisionmakers, media and community members stereotyping all older people as frail, vulnerable and unable to make decisions for themselves. These stereotypes have been solidified in government policy, with the implementation of age-based policies to restrict the movement of people over a certain age. Moreover, at times of scarce resources, inter-group conflicts may occur<sup>26</sup> – which makes efforts to promote intergenerational solidarity essential.

To ensure inclusion of older people in building cohesion, governments, UN agencies and multilateral bodies must:

- Ensure older people have access to digital platforms used for community engagement so they can have their voices heard effectively and are able to meaningfully participate on an equal basis with others.
- Promote digital inclusion of older people as part of the recovery plan. Ensure that new digital platforms are designed with accessibility for older people in mind
- Use a variety of communication mechanisms, such as radio broadcasts, print notifications and text messages to ensure critical information related to COVID-19, or invitations to participate in initiatives, reaches older persons and other groups at risk of being left behind.
- Make digitally-based services for gender-based violence survivors, such as hotlines and chatbots, inclusive and accessible to older women, who already face barriers to seeking support as well as barriers to mobile phone and internet use.
- Engage with local communities and older people's organisations as part of efforts to bring together civil society leaders.
- Ensure that public health measures that governments adopt are temporary, necessary, proportionate and do not discriminate based on age or any other characteristic, such as gender or disability.
- Create social dialogue between generations to promote intergenerational contact and intergenerational solidarity, and reduce ageist attitudes and stereotyping.

### **Key messages for data producers**

'Building back better' systems that improve lives of all individuals including older women and men in development and humanitarian contexts will require information to guide decisions, monitor progress, and foster transparency and accountability.

To ensure availability of timely and good quality disaggregated data across the five streams, data producers (i.e. National Statistical Offices, ministries, UN

agencies and their partners) must consider methodologies and approaches in relation to older people and their issues, identify ways for individuals' to inform data processes, and adhere to a human rights-based approach to data<sup>27</sup> and to the *Fundamental Principles of Official Statistics*.<sup>28</sup>

Data producers should:

- Ensure that data collection initiatives assessing situation of population groups (e.g. surveys or studies) cover older women and men, including those residing outside 'traditional' households. In addition to data on age, sex, and disability, personal information on location and living arrangements, ethnicity, income and other characteristics should be collected where possible and appropriate
- Ensure that primary or secondary data used to measure inequality and identify at-risk population groups is analysed and disaggregated. As a minimum data should be reported in 5-year cohorts (if not possible, in 10-year bands) across sex and disability, and other characteristics where appropriate
- Be transparent about how the older population and other marginalised groups are considered in relation to methodology, sample design, development of new indicators, data collection and analysis
- Make collected data, analysis and findings publicly available and disseminate them through a range of communication channels, languages and in different formats making accessible to all with special consideration for reducing the time lag between collection and reporting
- Provide opportunities for older people or their representative organisations, human rights institutions, relevant civil society organisations, and national focal points on ageing to participate in data processes to advise on data needs, appropriate methodologies and approaches, and to empower individuals to act on data
- Make ageing-inclusive data system part of the recovery by financing and supporting capacity of data providers at local, national, regional and international levels to produce timely and good quality disaggregated data on older women and men.

## Contact us

If you would like to give feedback on this toolkit, or if you need support with your advocacy, please contact:

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## Links to useful resources

### United Nations resources

- [Compilation of UN statements and documents](#)
- [UN Policy Brief: The Impact of COVID-19 on older persons](#)
- [Relevant UN System resources on COVID-19 and Older Persons](#)

### HelpAge resources

- [COVID 19: Everyone Matters policy brief](#)
- [Official statistics and COVID-19: Capturing evidence on older people for inclusive response and recovery](#)
- [Age-based measures coming out of lockdown](#)
- [Time for a UN convention on the rights of older persons: How the COVID-19 pandemic has shown the need to protect our rights in older age](#)
- [Responding to COVID-19 with improved social protection for older people](#)
- [Why social pensions? Achieving income security for all older people](#)

### HelpAge advocacy toolkits

- [Older people and the SDGs – six steps to ensure older people’s inclusion](#)
- [Age Demands Action: Hear our voices. Challenging ageism in the time of COVID-19](#)
- [It’s about rights. A toolkit to make the case for older people’s rights and a UN convention during COVID-19](#)

## Annex 1: Template email for UN Resident Coordinators

Dear [NAME],

**Subject: Upholding the rights and dignity of older people in the implementation of the UN framework for the immediate socio-economic response to COVID-19.**

I hope this email finds you well, in what are quite uncertain times.

[Insert any personal comments or references to existing relationship you may have with the UN country team here]

I am writing to highlight the anticipated socio-economic impact of the COVID-19 on older people in [Insert country] and the need to ensure that older people are included, and their rights protected and upheld in the implementation of the UN framework for the immediate socio-economic response to COVID-19.

As flagged by the UN Secretary General in his policy brief on the impacts of COVID-19 on older persons, older women and men face a disproportionate threat to their health, rights and social and economic well-being in the pandemic.

[Insert here whether your country expressed their support for the policy brief]

As you will know, the highest rates of serious illness and mortality globally have been reported for older people and those with serious underlying conditions. Many will also face socio-economic consequences, including threats to their income and job security. The risk of violence, abuse and neglect of older people has increased dramatically with lockdown measures. And finally, age stereotyping and discrimination, which has been amplified during the pandemic, leaves older people at risk of isolation and their rights being denied.

[ADD ANY STATISTICS, INFORMATION OR QUOTES FROM OLDER PEOPLE HERE THAT ARE RELEVANT TO THE SOCIO-ECONOMIC IMPACTS OF COVID-19 IN YOUR COUNTRY. NO MORE THAN THREE SENTENCES]

We would like to know from you what processes are being put in place to support governments to integrate the UN's socio-economic framework into national plans, and how you will ensure that the outcomes uphold the rights and dignity of older people.

We would be delighted to speak with you to learn more these processes, and their timelines, and to further discuss the risks and challenges to older people from COVID-19.

We anticipate your positive response.

With best regards,

[NAME, POSITION AND CONTACT DETAILS]

## Endnotes

<sup>1</sup> <https://www.worldbank.org/en/topic/poverty/brief/projected-poverty-impacts-of-COVID-19>

<sup>2</sup> <https://www.helpage.org/newsroom/latest-news/we-might-die-of-hunger-before-coronavirus-so-how-are-we-meant-to-stay-alive/>

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- <sup>3</sup> <http://www.un.org/development/desa/ageing/wp-content/uploads/sites/24/2020/08/Checklist-inclusion-Older-Persons-in-SERPs.pdf>
- <sup>4</sup> WHO World Report on Ageing and Health (2015) <https://www.who.int/life-course/publications/2015-ageing-report/en/#:~:text=The%20World%20report%20on%20ageing,person%2Dcentred%20and%20integrated%20care.>
- <sup>5</sup> <http://repository.essex.ac.uk/28027/1/013.pdf>
- <sup>6</sup> HelpAge Rapid Needs Assessments <https://www.helpage.org/resources/publications/>
- <sup>7</sup> <https://www.helpage.org/what-we-do/coronavirus-covid19/covid19-rapid-needs-assessment-rnas/>
- <sup>8</sup> [https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms\\_604882.pdf](https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms_604882.pdf)
- <sup>9</sup> <https://www.social-protection.org/gimi/ShowWiki.action?id=3417>
- <sup>10</sup> <http://www.pension-watch.net/knowledge-centre/?guid=5ee3a70aef9c8&order=n>
- <sup>11</sup> <https://www.who.int/news-room/fact-sheets/detail/elder-abuse>
- <sup>12</sup> <https://www.unwomen.org/en/digital-library/publications/2020/04/issue-brief-COVID-19-and-ending-violence-against-women-and-girls>; <http://www.sddirect.org.uk/media/1881/vawg-helpdesk-284-COVID-19-and-vawg.pdf>
- <sup>13</sup> [https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms\\_626831.pdf](https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms_626831.pdf)
- <sup>14</sup> [https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms\\_534326.pdf](https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms_534326.pdf)
- <sup>15</sup> [https://www.wiego.org/sites/default/files/publications/files/Chen\\_WIEGO\\_WP1.pdf](https://www.wiego.org/sites/default/files/publications/files/Chen_WIEGO_WP1.pdf)
- <sup>16</sup> <https://www.cesifo.org/en/publikationen/2020/working-paper/age-discrimination-across-business-cycle>
- <sup>17</sup> <https://iloblog.org/2020/05/25/how-to-ensure-older-workers-fully-participate-in-the-recovery-after-the-pandemic/>
- <sup>18</sup> <https://www.oecd-ilibrary.org/docserver/1686c758-en.pdf?expires=1597050721&id=id&accname=guest&checksum=772D521CAE8ECFBA582B31E0F2484146>
- <sup>19</sup> <https://iloblog.org/2020/05/25/how-to-ensure-older-workers-fully-participate-in-the-recovery-after-the-pandemic/>
- <sup>20</sup> [https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS\\_738742/lang--en/index.htm](https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_738742/lang--en/index.htm)
- <sup>21</sup> <https://www.helpage.org/download/5daeb444a7a4c>
- <sup>22</sup> [https://www.ilo.org/wcmsp5/groups/public/---ed\\_protect/---protrav/---travail/documents/briefingnote/wcms\\_743623.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---travail/documents/briefingnote/wcms_743623.pdf)
- <sup>23</sup> [https://helpage.sharepoint.com/sites/gaac/Shared%20Documents/CommonAge/Policy%20papers/Ag eism%20in%20the%20Commonwealth%2011.08.20.docx#\\_ftn1](https://helpage.sharepoint.com/sites/gaac/Shared%20Documents/CommonAge/Policy%20papers/Ag eism%20in%20the%20Commonwealth%2011.08.20.docx#_ftn1)
- <sup>24</sup> Ibid.,
- <sup>25</sup> HelpAge Voice framework (internal document DRAFT)
- <sup>26</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6611108/pdf/AJPH.2019.305123.pdf>
- <sup>27</sup> <https://www.ohchr.org/Documents/Issues/HRIndicators/GuidanceNoteonApproachtoData.pdf>
- <sup>28</sup> [https://unstats.un.org/unsd/dnss/hb/E-fundamental%20principles\\_A4-WEB.pdf](https://unstats.un.org/unsd/dnss/hb/E-fundamental%20principles_A4-WEB.pdf)